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ABSTRACT

This document is for administrators, rehabilitation counselors, and other professionals who support the employment of Social Security Disability Insurance (SSDI) beneficiaries and Supplemental Security Income (SSI) recipients with disabilities. It contains strategies for vocational rehabilitation (VR) programs to improve an SSI or SSDI beneficiary's chances for achieving employment. Specific chapters discuss the following: (1) a three-phase benefits counseling model and how this model can be used in the vocational rehabilitation process; (2) how the benefits screening phase of the model fits into the outreach, referral, and application processes in the VR program; (3) how the benefits advisement phase of the model fits into the VR planning process; (4) how the benefits management phase of the model supports the long-term employment of SSI and SSDI beneficiaries; (5) eligibility and services to students and young adults transitioning to work, special education and SSI, and postsecondary education and training; (6) source information and sample forms for use throughout the benefits counseling process; and (7) system issues that maximize the strategies outlined in the document. Appendices include a glossary, an overview of the most recent Social Security Administration legislation, and key state and regional staff. (Contains 38 references.) (CR)

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EFFECTIVE STRATEGIES TO IMPROVE THE EMPLOYMENT OF SSI/SSDI PARTICIPANTS

INSTITUTE ON REHABILITATION ISSUES

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Twenty-sixth Institute on Rehabilitation Issues

26

Effective Strategies To Improve the Employment of SSI/SSDI Participants

May 2000

Daniel C. McAlees, Co-Director

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SUBJECT: Dissemination of the publication entitled: "Effective Strategies to Improve the Achievement of Employment of Individuals Who Are SSI/SSDI Participants," developed by the Twenty-Sixth Institute on Rehabilitation Issues (IRI).

CONTENT: The purpose of this Information Memorandum (IM) is to transmit the enclosed publication to vocational rehabilitation (VR) professionals, advocates and other interested persons. The publication was developed by individuals representing various State VR programs, the Regional Rehabilitation Continuing Education Programs (RRCEP) and the Rehabilitation Services Administration (RSA). While the publication was developed under a grant from RSA, the contents do not represent the policy of this agency, and you should not assume endorsement by the federal government. Dr. Daniel McAlees, Professor Emeritus at the University of Wisconsin-Stout, served as the university coordinator for the study group.

This publication is intended to be a source of innovative ideas for rehabilitation personnel, a user's guide, and a tool for use in training staff. We recommend that the IRI publication be brought to the attention of personnel responsible for, or interested in, human resource development and staff training for use in planning, implementing and assessing the effectiveness of training on this topic. Clearly, the innovative ideas contained in this document have the potential to improve the ability of the VR counselor to provide quality services to individuals served by the Public VR program.

The IRI publications are widely used by VR counselors and supervisors, human resource development specialists, community-based rehabilitation service providers, administrators, researchers, educators and policy analysts in fulfilling the purposes of the Rehabilitation Act, as amended, particularly, "... to empower individuals with disabilities to maximize employment, economic self-sufficiency, independence, and inclusion and integration into society...".

An important part of RSA's mission is to provide training and technical assistance to State VR agencies on the problems facing rehabilitation service providers, and to disseminate and promote the utilization of knowledge resulting from current research. Through the IRI, high priority training needs are responded to expeditiously, and the study findings on a specific topic are quickly transposed into useful and usable training materials and publications.

Improving the skills of personnel in the Public VR program through effective training is a basic function of RSA's RRCEPs. RSA funds the following three RSA RRCEPs to serve as prime study group coordinators for developing the three publications: the University of Arkansas; George Washington University; and, the University of Wisconsin-Stout.

Copies of this publication may be obtained by contacting the IRI university coordinator, Dr. Daniel McAlees:

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Mark E. Shoob

Mark E. Shoob
Deputy Commissioner

Report from the Study Group on

Effective Strategies To Improve the Employment of SSI/SSDI Participants

Twenty-Sixth Institute on Rehabilitation Issues
Washington, DC
May, 2000

Jean Radtke, M.S., Editor
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Sponsor: University of Wisconsin-Stout Continuing Education Center

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Many people and many agencies were involved in the development of this IRI study. A summary of the IRI process follows to help the reader understand this involvement.

The IRI process begins with the solicitation of topics for the Prime Study Groups to study. We acknowledge the efforts of the Council of State Administrators of Vocational Rehabilitation (CSAVR), the Rehabilitation Services Administration (RSA), and state vocational rehabilitation agency administrators who submitted topics for study consideration.

The IRI National Planning Committee meets, discusses the topics, and selects those determined to be the most relevant for study. We acknowledge and appreciate the work that was done by that committee.

We wish to thank the state vocational rehabilitation administrators who nominated individuals to serve on this Prime Study Group.

The majority of nominees are state VR agency representatives, but also include other individuals who are recognized as authorities on the issue under study and/or represent important consumer perspectives. Serving on a study group is a considerable commitment in time and effort, and we appreciate the fact that state administrators allowed their employees time to participate in this group.

Most importantly, we want to thank the members of the Prime Study Group (page iii) responsible for this document. These are the real authors who did the thinking, writing, critiquing, and rewriting of 100 percent of the content. This publication represents their hard work, which included three meetings of several days each and involved many hours in between those meetings to complete writing assignments.

We wish also to acknowledge the work of the Full Study Group (page v). These individuals took the time to read, critique, and discuss this document. Their feedback was invaluable for further improving the quality of this document.

This editor wishes to personally thank the individuals who, in addition to serving as members of the Prime Study Group, also agreed to assist me on the Editorial Committee, the last step in finalizing the content of the document. Chairperson, John Halliday, Director of the Connecticut Bureau of Rehabilitation Services; Amy Porter, Connecticut Bureau of Rehabilitation Services; Peter Baird, Vermont Division of Vocational Rehabilitation; Mary Davis, RSA Central Office; Edna Johnson, RSA Central Office; and Deborah Morrison, Social Security Administration, helped me greatly in putting the "finishing touches" on this document.

Finally, Jean Davis composed this document. The attractive appearance of the document you are about to read speaks for her efforts.

Jean Radtke
IRI Study Group Coordinator and Editor

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Introduction

Introduction

Within this document are strategies for VR programs to improve an SSI or SSDI beneficiary's chances for achieving employment. These strategies are not meant to be all-inclusive, but are intended to provide a framework upon which to build. It is written with the understanding that the programs that serve the disability community are in perpetual movement and that VR professionals must keep abreast of the changes in the landscape to remain effective in their field. The recent passage of the Ticket to Work and Work Incentives Improvement Act (TWWIIA) of 1999 is a prime example of efforts to provide opportunity and support for SSDI and SSI beneficiaries to maximize independence through employment.

This document is for administrators, managers, rehabilitation counselors, and other professionals who support the employment of Social Security Disability Insurance (SSDI) beneficiaries and Supplemental Security Income (SSI) recipients with disabilities. Persons served by the Vocational Rehabilitation (VR) program who are receiving either SSDI or SSI benefits face unique challenges as they plan for, engage in, and maintain employment. Whatever your position and level of experience, this publication will provide insight into how we can better work individually and together to meet the needs of the SSI/SSDI beneficiary.

The purpose of this document is to introduce to VR agencies and VR counselors a new way of thinking about service delivery for SSI/SSDI beneficiaries. Persons with disabilities often have a great investment in maintaining benefits. Too often, they focus entirely on the benefits lost if they go to work, without the opportunity to compare what they lose to the gains they could achieve through employment. The ultimate goal of benefits counseling and resource planning is to allow individuals to make truly informed choices to maximize their life situation.

Helping persons with disabilities focus on the larger picture of how their earnings could offset their loss in benefits is a great challenge. Benefits, especially Social Security benefits, were often so hard to obtain that the thought of losing those benefits becomes very troubling. Furthermore, assistance that benefits a person's family or children, such as food stamps, often take on a psychological importance that far outweighs the actual dollar value.

Information on benefits should be presented in a way that lays out an individual's entire financial picture, showing them what is gained through employment and what may change in their benefits. Small, inconsequential losses in benefits need not serve as a deterrent to meaningful employment. VR counselors need access to appropriate resources for the VR program to provide adequate information about benefits and employment. This publication is designed to identify these resources and seeks to meet three primary goals:

1. To reinforce to VR professionals that employment is a viable option for SSI/SSDI beneficiaries and is often the vehicle to economic self-sufficiency;

2. To introduce a new model of benefits counseling for VR agencies; and

3. To provide VR agencies with a range of options for supporting both the VR counselor and the SSI/SSDI beneficiaries seeking or currently engaged in VR services.

It is important to keep in mind that the model presented in this document represents a divergence from current practice. An organizational commitment needs to be made to seek the most efficient and effective ways to implement and maximize the ideas and strategies presented.

Throughout the document, reference is made to individuals who are receiving benefits from either the Social Security Disability Insurance (SSDI) Program, or the Supplemental Security Income (SSI) Program, or both. In most instances, these individuals are referred to as SSI/SSDI beneficiaries. Please keep in mind that this refers to the entire population of individuals who are receiving benefits from either SSDI or SSI, or both.

A glossary is provided for the reader to review at this time, and also while reading the publication (see Appendix A).

This publication seeks to meet the goals outlined above by addressing a range of critical issues.

- **Chapter 1**. *Benefits Counseling in the VR Process* provides an overview of a three-phase benefits counseling model and indicates how this model can be used in the vocational rehabilitation process. The model described in this chapter provides the foundation for those chapters that follow;

- **Chapter 2**. *Outreach, Intake, and Benefits Screening* describes how the benefits screening phase of the model fits into the outreach, referral, and application processes in the VR program;

- **Chapter 3**. *Benefits Advisement in the Planning Process* describes how the benefits advisement phase of the model fits into the VR planning process;

- **Chapter 4**. *Benefits Management* describes how the benefits management phase of the model supports the long-term employment of SSI and SSDI beneficiaries;

- **Chapter 5**. *Students Transitioning to Work* provides information on eligibility and services for students and young adults; and

- **Chapter 6**. *Resources for the Vocational Rehabilitation Counselor* provides source information (websites, available programs, contact information) and sample forms for use throughout the benefits counseling process.

- **Epilogue**. Systems issues that maximize the strategies outlined in this document are addressed.

There are also a number of appendices included with this publication. To assist the reader of this document:

- **Appendix A** provides a glossary of key SSI and SSDI terms, benefit programs, work incentives, and special rules for people who are blind.

- **Appendix B** provides an overview of the most recent SSA legislation, PL 106-170, the Ticket to Work and Work Incentives Improvement Act (TWWIIA) of 1999, one of the most significant changes in disability policy in the last 20 years.

- **Appendix C** lists the Employment Support Representatives (ESRs). The role and function of the ESR will be described in more detail later in the document, but in summary, these individuals are Social Security Administration employees whose primary role revolves around work incentives and employment issues for SSI and SSDI beneficiaries. These positions are not represented in all SSA offices; therefore, the list was included for quick reference to see if such a position exists in your local area.

- **Appendix D** lists the Social Security Administration's Plans for Achieving Self-Support (PASS) and PASS Cadres. These cadres work directly with applicants to review their plans for employment. They are an important contact for any VR agency.

Note: All legislative and Internet information in this document is current through November, 2000, unless otherwise noted.

Historical Perspective

Historical Perspective

Introduction

This historical perspective provides a useful understanding of how the SSDI and SSI programs evolved into their current form, detailing the interplay between the development of these programs and the vocational rehabilitation program.

Where It Began

In 1956, when SSA began paying cash disability benefits to older workers (aged 50 or older) who were permanently and totally disabled, there was little expectation that these individuals would become independent while on the social security rolls. SSA's disability programs reflected the general attitude of society that severe disability meant permanent disenfranchisement from America's workforce. SSA, as did our culture, viewed persons with severe impairments as a group permanently excluded from meaningful work.

In 1967, Congress established The Beneficiary Rehabilitation Program as a joint partnership between SSA and the State VR program. SSA made direct grants to VR to provide services to certain SSDI and SSI beneficiaries so that they could return to, or enter, employment.

Where It Has Gone

In 1983, the program was transformed from a grant program to a reimbursement program for successful employment on a case-by-case basis. Successful employment for reimbursement purposes became nine consecutive months of substantial gainful employment (SGA) - a clear distinction from success as defined under the VR program.

Table 1 shows how reimbursements from SSA to the State VR program have increased in recent years:

Table 1
SSA Reimbursement to State Vocational Rehabilitation Programs

Fiscal Year	1995	1996	1997	1998	1999
Number of Claims Approved	6,238	6,924	8,337	8,850	11,124
Percent of Claims Approved	61	68	68	70	71
Total $ Reimbursed	72,733,912	65,480,627	89,200,347	103,037,127	119,980,646

Source: Social Security Administration, 2000

Other events that have served to further expand increased emphasis on return-to-work for SSI/SSDI beneficiaries include:

- In 1994, SSA regulations began allowing referral and reimbursement for successful rehabilitation of SSI/SSDI beneficiaries to other than the state VR agencies after the state had first opportunity to serve such individuals. Although "alternate participants" (APs) who contract with SSA to serve SSI/SSDI beneficiaries are new to the program and have not achieved the success at reimbursement demonstrated by the state VR, the state VR agencies are no longer the "only game in town."

- Since 1996, the leadership of SSA, RSA, and CSAVR has maintained a collaborative agreement. The agreement provides for work plans to evaluate and seek innovative, efficient mechanisms for improving current systems so that greater numbers of SSI/SSDI beneficiaries with disabilities will enter, return to, or maintain competitive employment consistent with their unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

- In 1998, SSA's State Partnership Initiative (SPI) awarded cooperative agreements to 12 states to develop projects to assist adults to enter the workforce. The approved states are California, Illinois, Iowa, Minnesota, New Hampshire, New Mexico, New York, North Carolina, Ohio, Oklahoma, Vermont, and Wisconsin. RSA has also funded six similar projects in Alaska, Arkansas, Iowa, Utah, Colorado, and Oregon.

- In 1998, amendments to the Rehabilitation Act made SSI\SSDI beneficiaries presumptively eligible to receive VR services.

Where It Is Now

The most recent SSA legislation, PL 106-170, the Ticket to Work and Work Incentives Improvement Act (TWWIIA) of 1999, is one of the most significant changes in disability policy in the last 20 years. It will help lessen the SSI/SSDI beneficiaries' fears about losing health care coverage and income during attempts to work and provide enhanced work incentives, outreach activities, and new service structures. It expands the pool of service providers beyond the state agency structure and offers innovative ways for service providers to receive funds for successful employment of SSDI and SSI beneficiaries. For additional information on TWWIIA, see Appendix B.

Chapter 1

Benefits Counseling in the Vocational Rehabilitation Process

Introduction

The purpose of this chapter is to define and describe benefits counseling and how it can be understood within the context of vocational rehabilitation services. The information in this chapter will be used and repeated throughout the document and forms the bases for our understanding of benefits counseling.

Benefits counseling is a key component for VR to successfully serve SSDI beneficiaries and SSI recipients who are eligible for VR services. This document proposes that benefits counseling should be integrated into every step of the VR process when serving individuals who receive SSI/SSDI. Such integration does not require that VR counselors become experts in benefits counseling. In fact, this publication supports the position that VR counselors and SSI/SSDI beneficiaries will need support around benefits issues in order to develop appropriate plans for employment.

Without an understanding of the benefits they receive and how those benefits are impacted by employment, many persons on SSI/SSDI will choose not to work at all or will choose to restrict their earnings to remain eligible for benefits. Accurate information on benefits and how they change with employment is difficult to find, so individuals often make decisions that are not based on sound knowledge or in their best interests. An understanding of benefits counseling and the roles that a VR counselor, benefits specialist, the SSI/SSDI beneficiary, family members, and other providers play is essential to help individuals make truly informed decisions about their employment.

Benefits Counseling and Vocational Rehabilitation

The last several years have seen an expansion of benefits counseling services being provided to individuals receiving SSI and SSDI. With the passage of the Ticket to Work and Work Incentives Improvement Act of 1999, with the growth in integrated employment service delivery, and an increased national emphasis on the employment of persons with disabilities, the need for access to benefits counseling services has become essential to promoting successful employment outcomes.

With an increased focus on benefits counseling comes the need to further define service delivery and identify the essential knowledge and skills required of counselors to competently work within this growing and specialized field. Historically, benefits counseling has been provided by practitioners from diverse fields. While these fields and professions have not, until recently, focused solely on the delivery of benefits counseling, they have been a valued activity that has been provided in addition to their existing responsibilities. These services have contributed greatly to the employment success of SSI/SSDI beneficiaries.

Public VR programs are demonstrating a strong interest in improving the provision of benefits counseling services and creating benefits specialists within their programs. The last five years have seen a growth in the number of practitioners that provide benefits counseling as the primary role of their job. This increase has been partly in response to SSA's inception of state initiatives focusing on the removal of barriers to employment for SSI/SSDI beneficiaries, as well as anticipation of the recent passage of the Ticket to Work and Work Incentives Improvement Act of 1999. Public VR can learn a great deal from the experiences of both informal benefits cadres and more formal, dedicated benefits specialists that have developed in various states over the last few years.

Definition of Benefits Counseling

Golden, O'Mara, Ferrell, and Sheldon (2000) define benefits counseling as:

> A set of strategies, services and supports to provide accurate information on public benefits and how those benefits are affected by employment. The goal of benefits counseling is to promote work preparation, attachment, and advancement. Benefits counseling is focused on increasing self-sufficiency of consumers of SSI/SSDI through informed choice, which may result in decreased reliance on public benefit programs and increased financial well being.

The definition provided above does not encompass other situations under which benefits counseling might be applied (i.e., supporting the movement of beneficiaries and recipients from institutions to community living and other areas, such as health care and insurance planning). While the arena of benefits counseling is larger than is narrowly defined here, for our purposes we are looking at its application in supporting successful employment outcomes for beneficiaries and recipients with disabilities in the public VR program.

Three Major Domains in Benefits Counseling

To begin looking at a framework for benefits counseling, Cornell University's Program on Employment and Disability convened a workgroup of leading national experts in the field to outline an initial framework and set of associated knowledge areas and job functions. This framework was further refined in the process of writing this document.

Three major domains of benefits counseling have been identified: benefits screening, benefits advisement, and benefits management. While these three domains can be described as sequential events, we believe that the provision of services will need to be dynamic, with services being revisited and reformulated on a continuing basis.

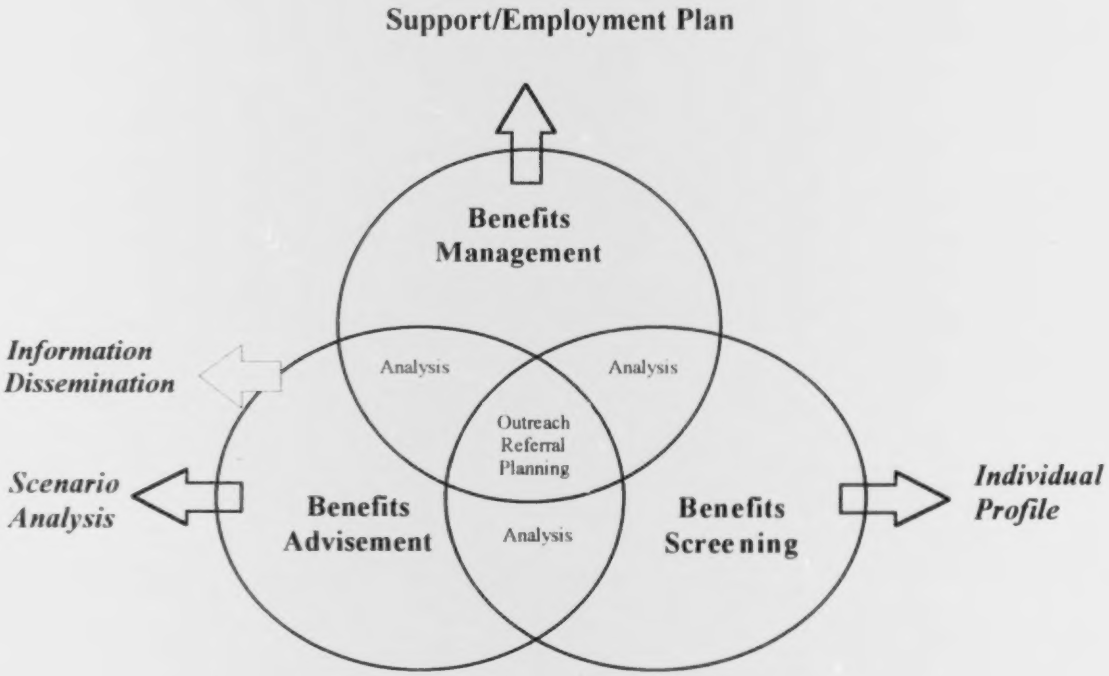
Support/Employment Plan
Benefits Management
Information Dissemination
Analysis
Analysis
Outreach
Referral
Planning
Scenario Analysis
Benefits Advisement
Analysis
Benefits Screening
Individual Profile

Figure 1. Benefits Counseling

Golden, O'Mara, Ferrell, and Sheldon (2000)

As referenced in Figure 1, for each of the three major domains, outputs have been suggested. It is important to note that benefits counseling skills are required on some level throughout the VR process.

Benefits Screening

Benefits screening is known by many terms. These include profiling, barriers analysis, intake, and others. The particular name is not as important as what is essentially done and how the information is used. The output of the benefits screening process should be a customized profile of an individual's personal demographics, history, benefit status, work status, and other relevant information. This profile is an essential tool in understanding the individual's current status so that it can be used as a springboard in proposing future alternatives and scenarios.

Benefits screening should occur at intake into the VR program, though it can and should be revisited as the person moves through the VR process and beyond. Benefits screening generally takes place in the early phases of the VR process, including outreach, referral, and application. At these early stages, the VR counselor can reach out to individuals who are receiving SSI and/or SSDI benefits. The benefits screening process gives the VR counselor a sense of the individual's benefit status and at the same time allows the counselor to introduce work as a viable option for the individual. By the time the individual beneficiary is determined to be eligible for VR services, an initial benefits screening should be conducted.

Benefits Advisement

Depending on familiarity with a specific individual and type of information being sought, a benefits advisement may be based on a comprehensive profile or simply involve short-term technical assistance in the form of information dissemination and/or education. In most cases, advisement is going to require an in-depth understanding of the person being served.and their current status. Based on this and the goals, interests and support needs expressed by the individual, the practitioner will conduct a comprehensive analysis of how the individual's current situation may be affected by changes in income, resources, living arrangements, supports, and subsidies. A critical step of advisement is ensuring that the individual and their key supporters understand the options available to them and providing adequate information for informed choices about employment. A key tool is the creation of a written benefits analysis. As in the case of benefits screening, benefits advisement is not necessarily a one-time process, but one that may be revisited as a person's employment or benefits situation changes.

The benefits advisement process is a critical component of the planning process between the VR counselor and the person served by the VR program. It provides the information necessary to explore the full range of employment options available to the individual, while continually evaluating the interplay between benefits and employment. Equipped with the information from the benefits analysis, the individual, with the assistance of the VR counselor, can develop an appropriate employment plan.

Benefits Management

Benefits management is seen by many to be a culmination of the preceding efforts. Often called by other names, such as benefits counseling and support planning, it is important to note that it consistently involves the identification and delivery of long-term supports. Benefits management picks up where advisement may end and involves actually supporting the individual in establishing a plan and developing long-term supports to ensure success. Proactive benefits management and monitoring is the key to success at this level of support, potentially focusing on regular intermittent contact with individuals, consistent communication, crisis management, information and referral, and problem solving and advocacy. Benefits management will be an essential tool at the time of placement and into a follow-up period that extends well beyond the required 90 days of employment.

During the management process, or any of the primary three domains, an individual may require follow-up screening and/or advisement, as was stated above.

Summary

The benefits counseling model presented here fits well with the VR process, and later chapters will describe effective strategies and tools to be used throughout the SSI/SSDI beneficiary's involvement with the VR program. The model follows the basic steps of the VR process, with benefits screening generally occurring at the time of intake and application, benefits advisement occurring throughout the development of the employment plan, and benefits management supporting the individual at the time of placement and beyond, ensuring employment retention. Although both the VR process and the benefits counseling process generally follow a linear process, circumstances often require an individual to revisit an earlier stage. The model presented here should be flexible enough to meet changing circumstances of the individual beneficiary.

This publication acknowledges the complexities of the current system. To maximize the potential for employment, both the rehabilitation counselor and the person served by the VR program need support in navigating these complexities. This publication recommends a partnership with benefits specialists, trained to understand and interpret the unique interplay between benefits and employment. Such a partnership allows the SSI/SSDI beneficiary access to accurate and timely information about the impact of employment on their benefits. It also allows the rehabilitation counselor to support the individual's development of an employment plan without being expected to have expertise in all of the intricacies involved in benefits counseling.

As the field of benefits counseling continues to grow and evolve, there will be an increasing need for continued and consistent development of human resources to meet this growing field. Developing a minimum set of standards and competencies for the profession and those practitioners that comprise it will be critical. However, equally important will be how success of practitioners in providing these essential services and supports will be measured and the extent to which customer feedback continues to enhance the quality improvement of planning and assistance services and supports provided. Finally, a clear understanding of the roles and duties between the VR counselor, benefits specialist, person served by the VR program, family members, and other stakeholders in each area detailed above will be essential to any benefits counseling effort.

Chapter 2

Outreach, Intake, and Benefits Screening

Introduction

To successfully implement the Benefits Counseling model described in Chapter 1, the VR program needs to focus some of its energies on outreach to SSI and SSDI beneficiaries. Accordingly, this chapter is designed to provide VR counselors with information and strategies to use as they outreach to and engage with SSI/SSDI beneficiaries.

The first stage of the Benefits Counseling model is benefits screening, in which the primary function is to understand an SSI/SSDI beneficiary's current benefit status. In addition to the outreach strategies, this chapter will describe benefits screening and provide a tool to be used in this stage of the process. Linking benefits screening to the earliest stages of the VR process allows the counselor and individual to gain an accurate understanding of the current benefit status. It also sparks discussion around the interplay between work and benefits, and reinforces for the individual that work is a viable option.

Role of the Vocational Rehabilitation Counselor

Benefits Screening

As discussed at the outset of this document, benefits screening needs to occur at the earliest point possible in the rehabilitation process. Although the concept has many different terms, its purpose is clear: to provide an accurate profile of an individual in terms of their interactions with benefit programs. In this first phase of the Benefits Counseling model, the counselor takes a more direct, active role than in the other two phases. In subsequent phases, the counselor forms a partnership with benefits specialists within the state to ensure that both the planning process and the employment decisions made by the individual reflect accurate information about benefits and their impact on employment. The counselor collects information about a variety of areas, including cash benefits, medical benefits, housing benefits, subsidies, and other forms of assistance. Employment can potentially affect all areas of an individual's benefit structure, or safety net. Acknowledgment of this impact at the outset will help alleviate some of the fears surrounding the exploration of employment as a means to maximize self-sufficiency. Although there is no prescribed process for collecting this information, a Benefits Assessment Checklist has been included in Chapter 6 as a potential tool for counselors to use in collecting benefits data.

Benefits Counseling From the Point of Initial Contact Through Successful Outcome

Counselors continually report that SSI/SSDI beneficiaries often make it to the point of job placement and then drop out. Some may stay on the job for a short time but leave based on fear of losing benefits. Discussions around benefits need to occur from the earliest point in the process. With this information available to both the counselor and the individual, the Individualized Employment Plan (IPE) will be based on the reality of the individual's fiscal and support needs. There will be no surprises at the time of placement into a job.

Building Trust

Building trust is the key to success with any of the strategies discussed in this publication. The fears and insecurities expressed by individuals are real. They need to be met with patience and understanding, on a personal level. If the individual cannot trust the process, employment will never be viewed as a viable option. In order to gain the trust of SSI/SSDI beneficiaries, information needs to be presented consistently and accurately. The individual has the right to all of the available information and the right to use this information to make an informed choice. Contacts need to be numerous and continue throughout the rehabilitation process, from outreach to closure, and through follow-up, whenever possible.

Partnerships between the VR program and SSA can also build trust. Information presented by both VR and SSA has more value than information presented by just one or the other. Joint presentations provide consistency and guide the development of a successful plan. SSI/SSDI beneficiaries need to trust that the individual or agency providing benefits-related information is providing all of the necessary information. Equipped with the full range of options, they then will be able to make informed choices about employment and the impact on their individual safety net.

Effective Strategies

Development of Benefits Specialists

Many VR programs across the country have begun developing benefits specialists, or "experts." It is important for all rehabilitation counselors to have a solid understanding of the disability programs, their respective work incentives, and the impact of employment on benefits. However, the complexities of the system make it difficult for untrained individuals to provide appropriate, individualized benefits counseling. With the development of benefits counseling experts, a group of individuals can be available to provide more detailed information about the interplay between employment and benefits. These benefits specialists can complement the services provided by the rehabilitation counselor. When the counselor and the individual reach the planning phase, it is critical to work with someone who has expertise in all aspects of benefits counseling. VR counselors should not be expected to have this full range of knowledge, but, again, should have access to those who do have the information. The strengths and weaknesses of various alternatives for developing benefits specialists are discussed in detail in Chapter 3, *Benefits Advisement in the Planning Process*.

Outreach Through Benefits Specialists

While individualized benefits counseling and planning usually comprise the majority of a benefit specialist's responsibility, this position is often used for staff and community education. In developing outreach plans to engage more individuals in the VR process, this community education can help spread the message that work is a viable option for SSI/SSDI beneficiaries. Many service providers are still operating on the belief that employment always results in a loss of benefits for an individual, and community education can help dispel this myth.

The Ticket to Work and Work Incentives Improvement Act of 1999 and the Balanced Budget Act of 1997 provide many new options for states to remove barriers to employment for persons with disabilities. One such option comes with a set of Benefits Planning, Assistance and Outreach cooperative agreements awarded to states by SSA. Through these cooperative agreements, each state will have a renewed focus on outreach to SSI/SSDI beneficiaries, as well as access to benefits specialists trained in state and federal benefit programs.

Partnership With Social Security

To develop an effective follow-up infrastructure or system, the VR agency should partner with the local SSA field office. It is useful to identify a designated staff person to work with VR counselors and persons served by the VR program around work incentive and benefit issues. The Social Security Administration is piloting new ways to ensure that these linkages occur. A newly created Employment Support Representative (ESR) position will address employment and work incentive issues for SSI/SSDI beneficiaries who are either working or interested in working (see Appendix C). It is critical to partner with these ESRs and others within the SSA office. Partnering with the Regional PASS Cadre is also important (see Appendix D). This Cadre operates regionally to provide information and approval of PASS Plans. The VR agency should also work with local and state agencies to develop a similar structure to ensure that the individual receiving VR services benefits from services provided at the local level. Taking time to identify and build a relationship with the appropriate SSA employee can provide the VR counselor with assurance that the individual will receive the benefits necessary for a successful long-term work event.

Early Intervention

If we have the opportunity to engage an individual soon after the onset of disability, or simultaneous with an application for benefits from the Social Security disability programs, we may find greater success. This requires strong community partnerships, including partnerships with rehabilitation hospitals, community rehabilitation providers, the medical community, and the mental health community, among others.

While it may seem contradictory to introduce an individual to the SSI/SSDI programs and the vocational rehabilitation program simultaneously, this is a moment of opportunity for the rehabilitation program. It is a time to reinforce the temporary nature of benefits while exploring the individual's feelings about work. This exploration cannot be accomplished in one meeting. Persons with disabilities have fears and concerns that present themselves along with the onset of disability and these fears need to be acknowledged, listened to, and addressed to the degree that the individual is ready to enter into discussion.

The Vermont Vocational Rehabilitation Division introduced an early intervention approach into its outreach strategy for SSI/SSDI beneficiaries in 1997. This project entails introducing applicants for disability benefits to the concepts of vocational rehabilitation and weaving the idea of employment into the fabric of the process. While it is too early to report any definitive impact on employment outcomes, Vermont's data demonstrates that 4.5 times as many individuals are being referred to the VR program as a result of this project. Of those referred, 6 times more individuals are engaging in the vocational rehabilitation process.

The Maryland Division of Rehabilitation Services gives us another example of an early intervention strategy. A pilot project with Johns Hopkins Hospital involves a VR professional on the trauma team, introducing the concept of VR and employment soon after the onset of disability. While these individuals may not yet be attached to the disability programs, their disabilities would most likely lead to application for disability benefits. Introducing VR and employment concepts at early stages assures the individual that employment is a possibility, assesses employment potential and options, and models the value placed on employment from the initial contact.

Targeted Intervention for Current SSI/SSDI Beneficiaries

Many of the individuals we want to reach are already on the disability rolls and have been there for some time. There are a number of options for targeting these individuals. The first strategy is to use the Social Security Bulletin Board System. This Bulletin Board contains the names of individuals referred to the VR program by Disability Determination Services (DDS). While it is widely recognized that the point in time at which DDS referrals take place is not optimal for successful engagement, this list creates a unique opportunity for the VR program. The list has been in existence since January of 1997 and contains the names of all individuals referred since that time. One outreach strategy is to contact individuals who have been on this list for a specified period of time. VR Programs could use the Bulletin Board listing as a means of identifying those individuals who have been receiving benefits for this time period and target outreach efforts accordingly.

Another method for targeted outreach is to determine a particular grouping of individuals for an outreach effort. SSA has the capability to run special reports and may be able to provide state specific information pertaining to the particular grouping the project is targeting. SSA and the VR programs share the same goal at this point in time: to maximize the employment of individuals with significant disabilities.

There are data to support the notion that many SSI/SSDI beneficiaries keep their earnings just below the level of Substantial Gainful Activity (SGA), based on any combination of the reasons discussed earlier in the chapter. These individuals may be needlessly underemployed due to misconceptions and fears. Consequently, outreach efforts focused on education of those who can be identified as underemployed may yield great opportunity.

Targeting Specific Referral Sources

In order to formulate outreach strategies for referral sources, it is important to know where referrals come from. Data from RSA give us this picture. Table 2 demonstrates the referral sources for SSI/SSDI beneficiaries and nonbeneficiaries.

The data contained within this table provide us with valuable information, based on national statistics. Therefore, an individual agency or office may wish to run this data on its specific population to determine whether there are any significant differences in its own referral patterns. Even without this step, it is clear that there are some differences in referral patterns based on whether or not a person is receiving SSI/SSDI benefits. There is a variety of possible explanations for this difference. Of particular interest for this context, however, is an understanding of the interplay of attitudes and misconceptions about an individual's ability to work and about the effect of work on benefits. Targeted education may change some of these attitudes and misconceptions, having a positive impact on future referral rates.

Table 2
Referral Sources

	Non SSI/SSDI Beneficiaries	SSI/SSDI Beneficiaries
Self-referred	25%	27%
Health Organizations	9%	22%
Educational Institutions	19%	15%
Other Individuals	14%	12%
Physicians	8%	3%
SSA Office	0.3%	1%
State DDU	0.5%	1%

Source: RSA-911 Data (1999)

The data also make it quite clear that the community has much more impact and involvement on the referral of an individual for VR services than SSA has. Outreach efforts, therefore, should be targeted at community providers and agencies. Outreach should occur in partnership with SSA wherever possible, to ensure that the same message is heard by all the key players. The one-stop centers provide one likely place to target outreach efforts. This will involve developing partnerships with the one-stop centers, and providing information regarding SSI and SSDI benefits and the effect of employment on those benefits.

Summary

The diversity of the SSI/SSDI population is great. Outreach efforts and strategies may depend on the unique characteristics of the special populations being considered for targeted outreach. The strategies and special populations mentioned here are only a small sample of possibilities. Building partnerships within each state will allow for exploration of creative outreach strategies.

Intervention at the earliest possible time changes the paradigm from one of dependence where cash benefits seem like the only option to one where employment becomes the vehicle to self-sufficiency. This paradigm shift requires that a continuous, consistent message be presented through personal contact with the SSI/SSDI beneficiaries, that partnerships be developed with other agencies and key players, and that the outreach efforts are flexible and responsive. If we accept the challenge to give voice to the value and the opportunities of employment, we increase the economic options for the SSI/SSDI population.

Chapter 3

Benefits Advisement in the Planning Process

Introduction

The previous chapter discussed benefits screening and outreach, suggesting strategies to engage with SSI/SSDI beneficiaries. A critical component is helping individuals who do not view themselves as workers to challenge this paradigm and begin exploring employment options. Once an individual can begin planning for work, the process of benefits advisement begins. Benefits advisement is an involved process that explores how work will impact the total benefit package of an individual who is interested in working.

SSDI beneficiaries and SSI recipients who are eligible for VR services must make several considerations when they develop potential road maps of their employment future. In addition to evaluating their skills, abilities, and interests, they must also take a critical look at how working would affect benefits they already receive. Medical insurance (acute and long-term), housing, cash benefits, personal assistance services, and other necessary benefits might change if the individual begins to earn an income. The focus of this chapter is not to educate VR counselors on the traditional career planning process; there are many excellent resources for that. Rather, this chapter focuses on the need for benefits advisement during the career planning process.

We believe that benefits advisement is a critical component of the career planning process for individuals who receive SSI and/or SSDI. As was detailed earlier, advisement is the second stage of benefits counseling. Advisement follows a thorough understanding and documentation of an individual's benefits "picture" that is established at intake, during benefits screening. Advisement is the process that details how future work will impact the various benefits received, such as health care and cash assistance, and how these benefits interact with each other when the person starts to work. The goal of advisement is to allow individuals to make an informed choice about employment with a full understanding of how work will affect their benefits.

Advisement can have different levels of intensity, based on the individual's need and the benefits they receive. Benefits specialists may base their advisement on a comprehensive profile or simply provide short-term technical assistance in the form of information dissemination and/or education to the person seeking services as referenced earlier. In most

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cases, advisement is going to require an in-depth understanding of the person being served and their current status. Based on this and the goals, aspirations, interests, and support needs expressed by the individual, the benefits specialist will conduct a comprehensive analysis of how their current situation may be affected by the proposed goals and changes in other variables such as income, resources, living arrangements, supports, and subsidies. A key tool to coordinate cooperation among the individual, key supporters and stakeholders, and the VR counselor is the creation of a written benefits analysis. As in the case of benefits screening, benefits advisement is not necessarily a one-time process, but one that may be revisited as a person's employment or benefits situation changes.

Role of the Vocational Rehabilitation Counselor

In order to assist SSI/SSDI beneficiaries in becoming employed, a complete understanding of all associated benefits is critical. It cannot be accomplished by having only a cursory understanding. The Benefit Assessment Checklist in Chapter 6 indicates there are a myriad of benefits potentially involved, each having its own confusing policies. Many of these policies are intricately interwoven with the policies of other benefits. Adding to this confusion, some entities that provide assistance to individuals may not recognize the work incentive provisions of other entities. For example, an individual might be saving money under a PASS and, as such, these assets are excluded; yet another agency might not allow this asset exclusion and, therefore, benefits are at risk. This can greatly increase the confusion and thereby greatly increase the need for complete understanding when individuals are attempting to plan their employment futures.

Given the vast array of policies and the multitude of possible interactions, it is imperative that the beneficiary be given correct information. Because of the complexity of the benefits that people receive, agencies cannot expect general VR counselors to perform their usual VR functions and to have an in-depth knowledge of all of these programs and policies. Agencies must have personnel who specialize in these knowledges and policies or have access to such specialists.

A major component of the VR philosophy is informed consent. The beneficiary must have all the necessary information to make an informed choice. All necessary information includes how employment will impact the benefits upon which the individual may be relying. The beneficiary must feel comfortable with the information and, even more importantly, comfortable with the situation that would occur if employment were attempted.

Another element that needs to be stressed to SSI/SSDI beneficiaries is that benefits, can, in fact act as a bridge to employment and independence. Because so many of the benefit programs, especially SSA related benefits, were originally designed to support retirement, too often individuals think that they will need to receive benefits for the rest of their lives.

However, an increasing number of benefit programs have incentives that, in fact, encourage a person to work and maintain a level of financial and personal independence. If individuals understand how these "bridges" to employment work, they will be more likely to attempt employment or increase their earnings.

With the recent focus on the employment of persons with disabilities at the national level, there should be an increase in persons on SSI and SSDI contacting VR. The Ticket to Work and Work Incentives Improvement Act of 1999 and the Balanced Budget Act of 1997 provide many new options for states to remove barriers to employment for persons with disabilities. Because they have been reported in the media, these new programs and policies should come to the attention of persons with disabilities who have an interest in employment. When barriers are removed and people realize that work is possible, they may contact VR agencies. They might then find work to be a viable option and become employed.

Career planning is a major component of the VR process. There are well-established models of career planning. However, when assisting SSI/SSDI beneficiaries, an additional strategy must be interwoven throughout this process. Benefits advisement must play an integral part of the process, for only with this critical component will beneficiaries be able to have true informed choice and, therefore, be able to make those decisions that will help them reach their potential.

Identify Benefits Programs

As was stated in Chapter 2, VR counselors should ask individuals at intake, or as soon as possible thereafter, about what benefits they are receiving. The partial list of benefits may include SSI, SSDI, food stamps, assisted living, housing assistance, Medicare, Medicaid, energy assistance, mental health services, state health plan, and attendant care. When applicable, VR counselors should ask about the status of each benefit received. For example:

- Is the person eligible for SSI, or just in the application process, or are they undergoing an appeal?
- Is the person in a trial work period under SSDI? If so, how many months are left in the trial work period?
- The individual is receiving Medicaid benefits under which program (SSI, state waiver, family health program)?

An individual should also be asked what their situation is regarding accessible or available transportation as well as about family members and what benefits are received. While asking all these questions might seem intrusive to some individuals (and counselors), effective benefits planning cannot be undertaken without comprehensive and accurate information.

Verifying Benefits

It is possible that individuals will not know about or understand all the benefits they or their family are receiving. Once they have provided information on the benefits received, the information should be verified by the benefits specialist.

Verification could take many forms; the process will depend on the types of benefits received and the benefit specialist's access to information. In general, standard forms should be developed to send to the local SSA office to verify SSA benefits and their status. In addition, benefits specialists need to, develop contacts with Medicaid and state TANF/Welfare to Work offices to verify information, when necessary.

Know the Local Benefits Experts

No matter what the strategy is to provide benefits information and counseling in their state, VR counselors will need to identify the local benefits specialists, or experts, in their area. Sometimes these experts will be people on the VR staff; other times it will be a contact in a local SSA office or another state agency.

It is probably impossible for any person to single-handedly be able to accurately verify all benefits information or be able to answer every benefits question without relying on experts outside of VR. While many VR counselors have informal contacts with such experts in their region, a more systematic effort for each VR office to identify and partner with other agencies around benefits is highly recommended (see Chapter 6, *Resources for Vocational Rehabilitation Counselors*).

Benefits Counseling as a Continuous Process

The benefits counseling and resource planning that VR provides to individuals will be very important to their successful employment. However, they will continue to need ongoing benefits counseling and resource planning as earnings increase, or their benefits eligibility change. That ongoing support might be critical in keeping the individual employed. Therefore, benefits counseling should not be viewed as a single event, but rather an ongoing service that individuals can access whenever necessary.

It is important to contact individuals regularly after the initial benefits analysis is completed, probably on at least a quarterly basis, in order to make sure no benefits or other employment issues have arisen.

Individual Participation in Benefits Analysis

The more that individuals are involved in their own benefits analysis and resource planning, the more independent and self-reliant they will be, especially in the long term.

Individuals must maintain documentation around all the benefits they receive. They should be encouraged to save all correspondence from SSA and other public agencies and to share, when appropriate, information from those agencies with their VR counselor. Individuals should always be encouraged to contact VR counselors or benefits specialists whenever they have questions about information received from SSA or other public benefit programs.

Individuals, to the extent possible, should be encouraged to verify and obtain benefits information themselves. Involvement in verifying and understanding their benefits will increase knowledge and empowerment and will allow them to make more informed choices about their employment and future independence.

Share Information Openly With Individual, Family, and Others

Individuals must be aware of all their benefits and how they will be affected by employment. Educating them on the complex and varied benefits they receive and how their benefits will be affected by employment is a difficult task but a necessary one if we are to best support our individuals in working to their full potential.

When appropriate, family members should be included in the benefits process. Family pressure and concerns have a substantial impact on the decision to go to work, and only by including the family in the benefits process can we best serve individuals and deal with pressures that families feel when a person with disabilities goes to work. Examples of such valid family concerns is when a spouse is worried about losing health insurance for the family if the person with a disability earns above a certain level, or when parents are concerned over how their child's employment will affect their cash benefits.

Using Available Resources to Provide Individualized Benefits Advisement

Understanding the impact of employment on the individual's entire benefit package is critical for the decision-making process. The SSI/SSDI beneficiary needs to know the immediate and long-term effects that working will have on their benefits. An appropriate program of VR services cannot be developed without addressing these concerns.

The VR counselor and benefits specialist can use the work-incentive information provided in several nationally recognized resources, including SSA's *Red Book* (2001), the

SSA Handbook (2001), or Cornell University's *Guide to SSA Disability Programs and Work Incentive Provisions* to explain the impact of work on benefits. Additionally, several pieces of software have been developed to assist individuals and their support network in computing and understanding the impact of earnings on current benefit status. In considering computer-based programs, VR agencies need to be sure that state-specific data are available and that these computations are accurate.

Benefits Counseling Options Under the Ticket to Work and Work Incentives Improvement Act (TWWIIA) of 1999

This landmark legislation provides numerous and important new options and services for persons on SSI or SSDI who go to work. Section 121 of the Act creates a "work incentives outreach program," where the Social Security Administration must do the following:

- Establish a program of grants, cooperative agreements or contracts to provide benefits planning, assistance, and outreach to disabled beneficiaries and family members who are potentially eligible to participate in work incentive programs.
- Establish a nation-wide group of trained, accessible, and responsive work incentives specialists *within* the Social Security Administration who will specialize in disseminating accurate information on Title II and Title XVI work incentives.
- Provide training to SSA work incentive specialist staff and technical assistance to organizations designed to encourage return to work.

These new options provide greater access to information about the impact of work on benefits and emphasize work as a viable option for SSI/SSDI beneficiaries. Many states applied for SSA's cooperative agreements around benefits planning, assistance, and outreach. Regardless of who is awarded the grant, persons served by the VR program receiving SSI or SSDI benefits can benefit from these services. If the state VR agency is not the grantee, it is important to develop a working relationship with the grantee. Also, relationships should be established at the local level between VR offices and the new benefits specialists within SSA. Putting energy into the development of these relationships at the front end will expand the range of services available to persons served by the VR program receiving SSI or SSDI benefits and considering employment.

This strategy involves no cost to the VR agency. Even if a VR agency has an existing benefits counseling/information program, it will need to find a way to work with these new SSA initiatives. Having SSA staff dedicated to providing benefits information to employed persons with disabilities will be a great benefit nation-wide.

Effective Strategies in Providing Benefits Advisement

Since every VR counselor cannot serve as a benefits specialist, state VR agencies need to develop mechanisms and strategies to provide effective benefits advisement and resource planning to the persons they serve. SSI/SSDI beneficiaries have profound fears about losing benefits, and helping them to understand how work affects their benefits is an essential part of the vocational rehabilitation process.

There are four benefits advisement strategies detailed below, citing strengths and weaknesses, roughly organized from the most intensive (and expensive) to the least.

In-House Benefits Specialists

This strategy involves creating a team of benefits specialists within the VR organization that provide full-time, intensive benefits advisement and resource planning for VR counselors and persons served by the VR program.

These benefits specialists would serve as expert resources on how employment affects an individual's benefits. They would supplement, rather than replace, the services provided by general VR counselors. Because they would work full-time on benefits counseling and resource planning, they would have great knowledge of state and federal benefits and how employment affects these benefits, and they would have the resources and connections to provide accurate and timely information to individuals and counselors. They could provide benefits counseling early in the VR process, so that changes in benefits would be anticipated before a "crisis," such as losing health care insurance, occurred.

Benefits specialists would receive referrals from VR counselors to provide benefits information to job-ready individuals. These benefits specialists should, whenever possible, meet together with the individual and VR counselor so that the VR counselor would also be fully aware of the benefits situation. The benefits specialists would also pull in other key players, thereby creating a "team" for the individual to rely on when making informed choices regarding benefits and employment.

The outcome of the benefits advisement process is a benefits analysis. Once a benefit analysis is completed, this analysis should be available to the individual, the VR counselor, and other key players, and the benefits specialist should be accessible on an ongoing basis to provide continued support whenever a change in earnings or benefit status occurs.

Strengths. The strengths of this approach are many. VR agencies would have in-house experts, ensuring a high level of integration between benefits specialists and VR services. Having benefits specialists within the VR structure would create great opportunities for broad-scale education of VR staff on benefits. Having the expertise to deal proactively with benefits issues before a crisis is reached could be invaluable.

Weaknesses. This approach is likely very expensive. The state of Vermont was able to create a team of six benefits counselors within their VR agency through the use of grant and cooperative agreement funds from the Robert Wood Johnson Foundation and Social Security Administration. However, Vermont is hoping that the improvement in services resulting from having these benefit counselors will lead to a substantial increase in the number of SSI/SSDI beneficiaries working, the amount that this population earns, and therefore the amount of reimbursement to the agency received from SSA.

Contract With Outside Agency to Provide Benefits Counseling

This approach is similar to the strategy above, except that the VR agency would contract with an outside organization, or group of organizations, to provide expert benefits counseling to persons served by the VR program. The relationship between the outside agency and the VR agency would be contractual and could work with flat fees or fee-for-service. The same recommendations for meeting jointly with individuals and counselors would apply to this strategy also, as would the need to provide ongoing support to individuals and counselors, whenever possible.

Strengths. This approach would provide high-quality, accountable benefits counseling services. Services could be contracted through competitive bids, and a heavy emphasis could be placed on quality and responsiveness. Many of the strengths of having in-house staff would also apply here.

Weaknesses. This approach would likely be even more expensive than having benefits specialists as part of the regular VR staff, though agencies can control fees through various mechanisms. Furthermore, there may be pressure to provide only one benefits analysis per individual, rather than ongoing support, since the cost of repeated visits to the benefits specialist could be compounded if a person's employment or benefits situation changed frequently. Increases in reimbursement could serve as a source to fund this approach. Wisconsin and New York both have examples of systems where outside agencies, or outside contracted individuals, provide benefits advisement to the VR agency on a fee-for-service basis.

Identify Specialists for Information Within a State

This strategy could involve one of two approaches (or possibly both simultaneously). First, a VR agency could designate one or more staff people that would provide benefits information (in contrast to a full benefits analysis) to counselors and individuals via telephone or occasionally in person. Because the state would only have a relatively small number of people to provide such support, these individuals could not provide the type of intensive, in-depth, and ongoing support detailed above. However, they could accurately and quickly provide advisement on benefits to counselors and individuals that would be invaluable to helping a person in understanding how work affects benefits. This approach would place a greater responsibility on the VR counselor to both know which questions on benefits to ask and also how to utilize benefits information. Connecticut has been utilizing this approach, with good results.

Second, VR could identify key individuals in other state agencies that could provide details on benefits and how work affects benefits. Not only would there be difficulties in getting other agencies to devote staff time to this, it would also place a great burden on the VR counselor to know who to contact in other agencies for support, and the appropriate time to make such contacts. A benefits specialist, such as the one detailed above, might be better able to handle such contacts.

> **Strengths**. This approach would have relatively low costs, and having an in-house expert provides good opportunities for training. Utilizing technology such as email or the Internet, as well as electronic access to benefits information, has proven to be very effective in providing this sort of benefits advisement and would significantly enhance the effectiveness of this strategy.
>
> Having people in other agencies (for example, a person in the Medicaid office to answer Medicaid benefits questions) the VR counselor can contact for benefits information is probably essential, no matter what strategy is followed.
>
> **Weaknesses**. Because there would be less staff working on benefits advisement, and because such staff probably would not be readily available to individuals and counselors on a face-to-face basis, there will be a greater responsibility on the VR counselor to coordinate benefits information and utilize the benefits specialists appropriately. Also, providing information rather than an intensive benefits analysis would likely lead to more mistakes and missed implications when looking at an individual's benefits and how earnings would affect them. Coordinating with other agencies to provide information on a regular basis may prove challenging.

Peer Counseling/Mentoring

Peers can be a strong source of support, information, and advisement for persons with disabilities. The level of camaraderie, trust, and empathy that is developed among peers can be very powerful. Under this model, a team of peer counselors would be able to provide accurate benefits information and advisement to individuals seeking employment. The peer counselors would provide ongoing support to individuals, much as is detailed above. Peers could provide some unique perspectives and might be able to better communicate with individuals about their concerns, frustrations, and fears.

> **Strengths**. This approach would be low cost and would provide some unique supports and services to individuals that could not be obtained elsewhere and might be essential to a successful employment outcome. This approach could be combined with any others detailed here. Peers could be identified through existing peer networks or recruited individually.
>
> **Weaknesses**. Training and recruiting peer networks would involve many difficulties. Accurately training on benefits and how to conduct benefits advisement would be a great challenge, as it is with anyone who provides benefits counseling services. Accountability standards would have to be developed and the quality of counseling and advisement would need to be carefully monitored.

Summary

A number of strategies/models for benefits advisement were detailed above. In all cases, the VR counselor will play a key role in the provision of these services. VR counselors will be the key coordinator for accessing benefits counseling, and combining that information with the training, skills, and attitudes that beneficiaries require to find and maintain a job. The VR counselor will also be the key person in coordinating the ongoing postemployment services beneficiaries need to maintain employment or advance in their jobs, and in ensuring the entire family is informed and well-served by the beneficiary's employment.

In the end, the choice to work belongs to the individuals. By providing accurate, verifiable information on benefits and how they would be affected by employment, counselors are allowing individuals to make *informed employment choices*. Beneficiaries may make decisions with which a VR counselor will not agree. Sometimes they will choose not to work when the benefits information indicates employment would improve their life and income. Sometimes they will choose to work when counselors think that working will make them worse off than if they had stayed unemployed. However, benefits counseling and resource planning is not a prescriptive service. Rather, it is an essential service that allows individuals to make more intelligent, better informed, and life enhancing choices about employment and the quality of their lives.

Chapter 4

Benefits Management

Introduction

Decisions concerning work and benefits continue long after an SSI/SSDI beneficiary finds a suitable employment situation. An important part of providing long-term employment supports is the establishment of a structured support process to keep the individual employed. While an individual with a disability often exits the VR program after 90 days of consecutive employment, this time frame is not necessarily adequate to ensure retention of employment.

In the benefits management phase of the Benefits Counseling model, the individual, the VR counselor, and the benefits specialist develop a plan to engage the necessary resources and support systems needed for continued and enhanced employment. This may include several activities:

- Provision of support in making informed choices;
- Establishment of both employment-related goals and benefit management supports;
- Evaluation and infusion of benefits management goals into the array of existing service delivery plans that may intersect the person's life (e.g., Individualized Plan for Employment [IPE], Individualized Education Program [IEP], Individualized Service Plan [ISP]);
- Development and implementation of a comprehensive plan that identifies supports/activities needed, time frames, responsibilities and roles, desired outcomes, resources needed, and quality indicators;
- Provision or identification of a provider of proactive benefits management and monitoring; and
- Ongoing screening and advisement regarding current and future benefit status.

Quality benefits management support also considers the individuals being served and their unique status. This may include not only benefit programs administered by the Social Security Administration but also private benefits received and other public entitlements.

The key to quality benefits management support is ensuring that long-term services and supports are available and accessible to the individual along each point of their career path. The remainder of this chapter will focus on effective service delivery strategies, model programs, benefits management implications, and resources for future reference.

Role of the Vocational Rehabilitation Program

The establishment of ongoing communications and links with individuals after entering employment creates a significant shift in role for the majority of VR programs. The model described in this publication proposes that ongoing communication will need to be established and continued long after the individual completes 90 days of employment. The VR program's role is to be a source of information, consultation, and advice for individuals currently or formerly in the VR program and their families. The primary role of the VR program shifts from service provider to information specialist on matters concerning benefits. The type of staff that would have a relationship with the individual may expand beyond the VR counselor. Paraprofessionals, technicians, benefit specialists, or contracted individuals or agencies may serve as the primary source of contact with the individual.

Organizations that provide complex advice to the persons they serve on a regular basis may be good organizations against which to benchmark the types of services and approaches and the quality of VR services. Financial investment institutions such as mutual fund companies and banks, all of which provide complex advice and consultation of a financial nature, may utilize techniques that would be useful to consider. For example, the use of account representatives or account associates that provide individuals and their families with a very personalized contact may be one alternative. The wide use of electronic access may enable the individual to initiate contact through a more anonymous method. All of these methods need to be considered so that the interactive communication that is necessary to maintain a strong connection with the individual can be established and maintained.

Effective Strategies

The uniqueness that exists across state VR agencies and providers has evolved an array of approaches to effective service delivery. Several of these strategies and models are explored in greater depth below. It should be noted, however, that this is not a comprehensive list but rather a sampling of strategies and models taken from across the United States to represent the diversity that exists in practice. Consistent across each of the strategies explored is a stable relationship with the regional, state and local SSA offices and appropriate personnel.

Increasing the participation in the workforce of persons with disabilities receiving SSI/SSDI requires the tenacious effort of the beneficiaries and the VR programs. Given the opportunity for a newly defined workforce development system that will include state vocational rehabilitation and employment networks created by the TWWIIA, it will be incumbent upon all partners to create opportunities for inclusion at all levels. The following are examples proven helpful to individuals, programs, and systems to raise the rates of employment among persons with disabilities.

Job Retention Projects

A number of agencies have experimented with active follow-up systems where agency or contracted staff maintain direct contact with the beneficiary after they become employed and their VR case file is closed successfully. The purpose of these ongoing relationships is to maintain regular contact with the individual and their family to support employment success.

The VR counselor is a key component of these systems in identifying individuals who would potentially benefit from access to follow-up services. The types of follow-up services provided in these systems are significantly different from the usual limited follow-up and post employment services. The primary differences are that these follow-up services are very assertive in the methods and frequency of contact with the individual. As this represents a change in current practice for many VR programs, there is a need to educate, communicate, and support counselors as they plan with individuals to initiate these services.

One example comes from Connecticut. The Connecticut VR Program has initiated the Norwich Job Retention Project, designed to create ongoing contact with persons served by the program for up to one year. A job retention plan is developed between the individual and the VR counselor that identifies the frequency, time, location, and method of the follow-up. The plan also specifies particular issues that will be focused on in the follow-up based on the individual's employment history and needs. The goal is to address issues that have directly impacted on employment success, such as history of short term jobs.

The Norwich Project utilizes a staff person who is on contract with the VR program and has the capacity to contact the individual's family, employer, and others at any time. The qualifications for the position of Job Retention Assistant are good communication and organizational skills, strong interpersonal skills, as well as the ability to be self-directed. The Job Retention Assistant will maintain contact by telephone, fax, email, and face-to-face, depending on the individual's preference. The goal of the project is to provide active follow-up contact to persons served by the VR program who have completed their Individual Plan for Employment, with a primary emphasis on those who are SSI/SSDI beneficiaries. The outcomes for the project are to maintain employment, support career growth and advancement, and to encourage active utilization of post-employment services. The initial impact has primarily been on job retention. One advantage of this approach is that the public agency maintains direct management and can base the capacity of the follow-up system to adjust to demand for services.

Housing Strategies

Housing is a critical issue for many beneficiaries as they develop their employment plans. A number of innovative strategies have been implemented to address some of these issues. Housing- or Place-Based Employment Services is one of these innovations. A three-year national demonstration called *Next Step: Jobs* (Rio, Russell, Dudasik, & Gravino, 1999) provides evidence that formerly homeless individuals with multiple barriers to employment can enter the workforce through a housing-based employment intervention. For more specific information, see www.csh.org.

Plan for Achieving Self-Support

The Plan for Achieving Self-Support (PASS) is an

> SSI work incentive under which persons with disabilities can set aside income and/or resources to be used to achieve specific work goals. A PASS can be established to cover the costs of obtaining an education, receiving vocational training, starting a business, or purchasing support services which enable individuals to work and result in reduction/cessation of benefits (SSI/SSDI). PASS is meant to assist a person in competing in the job market. (Retrieved October 24, 2000 at http://www.ilr,cornell,edu/ped/pass).

Money set aside in a PASS could support long-term employment goals and help ensure that the individual remains employed. Under regular SSI rules, SSI benefits are reduced by an individual's other income. But the income set aside for a PASS does not reduce the SSI benefit, which means an individual can get a higher benefit when they have a PASS (http://www.ssa.gov/pubs/11017.html).

Coordinated Interagency Case Management

Coordinated interagency case management can be developed to maximize the effectiveness of existing collaborative efforts. Interagency plan development can reduce the duplication of efforts. The supported employment model delivers an excellent model for interagency planning. Each collaborating agency, the individual, parents, special education teacher, clubhouse member, or other vested party shares in the cost and provision of service. Shared success when employment occurs is not only cost effective, it strengthens existing systems. The development of an interagency plan establishes new partnerships using existing resources to benefit employment outcomes. The Association for Persons in Supported Employment is a member association offering information and support of service providers (http://www.apse.org).

The state departments of Mental Health and the offices of Rehabilitation Partnerships in a number of states have made a difference in the quantity and quality of vocational rehabilitation services available to individuals with serious mental illness, many who receive SSI/SSDI. In Minnesota, the collaboration between MH and VR, reflected in interagency agreements and in cooperative funding of employment services, has demonstrated positive outcomes for individuals with psychiatric disabilities.

Utah has developed a partnership between the State Office of Rehabilitation and the Department of Workforce Services. The goal is to increase the number of competitive employment outcomes for job seekers with disabilities by combining the existing job placement and development efforts of both agencies and providing statewide job development and placement services.

Medicaid Waivers/Medicaid Buy-In Options

Individual states have developed waivers to provide opportunities for individuals to participate in more services. Medicaid programs have had a bias toward funding institutional care such as nursing homes, and states have developed waivers to counter this bias with the stipulation that services in the community cost less than the same service provided in the institution. The waivers are intended to provide payment for needed services, which would not otherwise be available under the state Medicaid program. Each state has written waivers to benefit individual Medicaid recipients meeting Social Security disability criteria who are capable of directing their own care. For example an individual sustaining a traumatic brain injury may qualify for services if a waiver has been established in the resident's state. Waivers have created opportunities for individuals to remain at home, participate in job sampling, complete high school, and transition into the community employment and participate in funded services.

Contracting for Benefits Management

The relationship between benefits management and continued employment by the individual is critical. Failure to properly advise or support beneficiaries on a long-term basis can result in unintended consequences, such as overpayments and changes in health care, housing, or other supports. Again, this publication does not presume that VR counselors have the time to develop the level of expertise necessary for benefits management. Instead, partnerships with formal or informal benefits specialists are critical to successful implementation of the Benefits Counseling model proposed here.

Group Advisement/Family Training

Many individuals who enter employment for the first time continue to receive benefits of some nature from the SSA system as well as other programs, such as food stamps and housing assistance. One of the strategies that has worked with individuals and their support networks is the continued availability of group information sessions in the community that can be open not only to individuals who are employed but to those who are seeking employment. These sessions can also be utilized as a focal point for continuing education and coordination with health care and human service professionals with whom individuals have ongoing relationships. The group process continually updates information and makes available to individuals the opportunity to share information with others and identify key individuals in organizations in the community that can be sources of consultation.

Technological Approaches to Benefits Information

The development of dedicated information lines such as an 800 number just for benefits planning and assistance services is another strategy for ensuring accurate and timely information. Experience in providing benefit consultation to persons served by the VR program has demonstrated that a great majority of the contact can be done by phone with information shared quickly by fax and other electronic mechanisms such as email and attachments. Email technology and web sites would enable individuals to access information on an ongoing basis at any time, thus allowing for maximum convenience. Such information can be the difference between an individual keeping a job or losing a job.

Newsletters

Newsletters modeled after those used by financial advisors and investment groups that address complex benefits issues may have potential application in this area. A quarterly newsletter updating an employed beneficiary on changes in state or federal benefits would also serve as a reminder that assistance is still available, if necessary, and could include contact information for the benefit specialists in the individual's area.

Cross-Disciplinary Efforts

There is a significant need for cross disciplinary training, coordination, and consultation regarding state and federal benefits. Social service providers that will have ongoing contact with beneficiaries or their families need an overview of benefits and access to benefits specialists in the community. These professions need to know where to refer a beneficiary or the family as economic circumstances change. Providing information to clergy and community organizations that would be in contact with families would increase the points of contact in the community. In many cases, the VR program already has relationships with a number of these groups as part of the referral and ongoing rehabilitation process. We need to consider extending this relationship to promote a wider perception of what the vocational rehabilitation program can do.

Benefits management is just one phase of the Benefits Counseling model and should be conducted using one of the approaches outlined previously. Details on the strengths and weaknesses of these alternative approaches can be found at Chapter 3.

Summary

While specifics on providing benefits advisement and management supports were outlined earlier in this publication, there are several critical events and incidents that must be considered as part of developing a long-term support framework for any beneficiary. Many have misconstrued the role of long-term benefits management support and advisement to mean maximizing the individual's benefits while at the same time maintaining a minimum level of employment effort below the person's actual ability. The critical events and incidents explored below are points in an individual's life when the VR counselor, advocate, or other identified support person will need to ensure that appropriate levels of support are provided to minimize potential crisis situations. Developing an effective model for providing long-term benefits advisement and management support begins with outlining a plan for how services and supports will be delivered. Depending on who may be providing the supports, goals and objectives may be articulated in pre-existing service delivery plans. However, if a third party is going to be used as the delivery mechanism of supports, it is helpful to develop a separate service delivery plan that clearly articulates the supports and activities, time frames, roles, responsibilities, desired outcomes, resources, and quality indicators of success. A sample plan format is outlined in Illustration I followed by a completed support plan in Illustration II in Chapter 6, *Resources for Vocational Rehabilitation Counselors.*

Additional points to keep in mind when developing support plans for individuals with disabilities:

- This is the individual's support plan. The plan must be developed with the individual, with a full understanding about what, how, when, and by whom the supports will be delivered.

- It is essential to support the individual to self-manage their own benefit/employment situation to the extent possible. While the individual may not initially demonstrate the ability to self-manage their situation, this should be developed over time. For example, increasing the individual's skills at handling benefit-related correspondence over time may help when timely responses to Social Security are needed.

- Any good plan will most likely require an array of resources to successfully fulfill the goals of the plan. Therefore a plan must address the needed resources even when the identified funds stop.

- When timelines are developed, take into consideration the frequency at which the individual may need reinforcement or encouragement. Many plans are written to fulfill some reporting requirement and are never revisited to customize to the individual's needs, desires, or preferences.

- Assign responsibility in the plan and make sure those with assigned responsibility understand their task(s).

- Finally, while there is a natural tendency to use boilerplate plans, each plan should be customized to meet the unique situation of the individual. Nothing raises questions regarding quality or comprehensiveness of services and supports delivered by an agency or professional like a "carbon copy" or "cookie cutter" plan.

Chapter 5

Students Transitioning to Work

Introduction

The Benefits Counseling model outlined in this document is clearly valid for students and young adults who may be eligible for or applying for SSI and/or SSDI benefits. Additional points that need to be considered when working with high school students and young adults as they transition from childhood to adulthood fall into the following categories:

1. The difference in eligibility criteria for SSI between children and adults.

2. The potential impact of benefits and work incentives on family economics.

3. Independent living and other community support services as young adults make the transition from living with their families to living in the community.

4. The special rules and considerations for young adults in postsecondary education and training programs.

5. The impact of other adult services that may now become available to young adults once they have reached the age of 18, such as Medicaid, food stamps, housing.

SSI for Children

The criteria for eligibility for SSI for children, which are those individuals under the age of 18, are based on family income and what are known as childhood eligibility criteria for SSI. The childhood standards for SSI are different from those for adults. In childhood cases, consideration is given to age appropriate behavior for children. Because of this, Social Security does a new determination of eligibility once an individual turns 18 years of age based on adult criteria of eligibility. These criteria, aside from the medical listings, also look at vocational functioning.

It is important that vocational rehabilitation counselors understand this redetermination of eligibility for SSI following the 18th birthday and are able to articulate to the student, their family, school officials, and others involved with this young person. This new eligibility determination can, in fact, result in discontinuation of SSI benefits.

The number of individuals receiving SSI under the age of 18 is approximately 877,000. About 70 percent fall into the following major disability categories: mental retardation (36%), mental disorders (22%), and nervous system disorders (11%) according to the SSA Annual Statistical Supplement Report (1999).

Special Education and SSI

Individuals receiving SSI under the age of 18 may or may not be also receiving special education depending on whether or not their disability has an impact on their educational functioning. It is therefore important when outreaching to this population that vocational rehabilitation counselors remember to reach out beyond the special education department to school guidance, health, and nursing offices, as well as clinics that would specialize in childhood and adolescent disabilities in their communities.

The significance of benefits counseling during the high school years is for individuals and their families to see the availability of benefits and work incentives as resources to be utilized in transition to work. The ability to convey the concept that cash and medical benefits are assets to be used during the post-secondary education and career development phase for young adults is critical for setting the stage for effective vocational rehabilitation decisions.

A major emphasis at this point is that the individual, their family, and others understand that, from the point of view of Social Security and adult systems, the young adult has moved from being seen as a child to being considered an independent adult. This means a change in the roles and expectations for the young person. They will be involved in all key decisions regarding their careers and will need to have full understanding of benefits, work incentives, and other options that are open to them through Social Security and other programs.

This period of transition for entitlement to services for those students served under the Individuals with Disabilities Education Act (IDEA) to eligibility programs in the adult system will require a great deal of coordination, negotiation, and planning in order to structure benefits and services in the most effective manner.

For those students in special education, IDEA requires that transition planning begin at age 14 and that there needs to be written transition goals regarding vocational, educational, and independent living planning for the young adults as they transition from the special education system. The involvement of vocational rehabilitation at the key points in the transition planning process is essential since it will be primarily the VR counselor who will bring to the planning process the information regarding Social Security Work Incentives, Medicaid services, and other adult community services essential in developing transition and future rehabilitation plans.

The Rehabilitation Act Amendments of 1998 require that the state vocational rehabilitation programs coordinate with education officials with the goal of facilitating the transition of students with disabilities from education to vocational rehabilitation. A key point in the coordination is the determination of VR eligibility and the development of the Individualized Plan for Employment prior to the student leaving school. IDEA requires that service providers involved in the treatment of the student participate in Individualized Employment Plan meetings and assume responsibility for completing specific actions agreed to at these meetings.

For those students who are eligible for SSI under the childhood program, it may be critical to establish eligibility for vocational rehabilitation and develop an IPE, where practical, prior to the 18th birthday. If such a plan has been developed and initiated, even if the young adult is determined to no longer be eligible for SSI under adult SSI disability criteria, the individual may continue to receive benefits beyond the age of 18 while engaged in a vocational rehabilitation program leading to employment.

Youth Continuing Disability Initiative

A Youth Continuing Disability Initiative pilot program began early in 2000, involving SSI youth in Maryland and Florida, ages 15 and 16, who have had a Continuing Disability Review performed by the state Disability Determination Services. This project is designed to assist youth in obtaining the information and services they need to successfully transition to work. For many, disabling conditions are long-term. With this early intervention and appropriate accommodations/services, there is greater opportunity to make changes that will allow individuals to lead full and independent lives.

With this initiative, youth will have an enhanced opportunity to gain information on skill assessments, career aspirations, educational goals, health care needs, reasonable accommodations, employment supports, and community and governmental transition services. The pilot will provide individual assessments, inform and motivate young people and their families about employment development opportunities, and provide linkages to services.

SSA has contracted with MAXIMUS, Inc. to work with SSA and partner agencies to assist youth with disabilities in transitioning to work and to examine the impact of an early and more proactive approach for those adolescents transitioning to employment and postsecondary education. The Youth Continuing Disability Initiative will allow SSA to examine the feasibility of such an approach on a national basis.

Family Economics and Transition

A report from The Lewin Group at Cornell University (Wittenburg, Fishman, Golden, & Allen, 2000) indicates that 68 percent of the families of students with disabilities have a family income below $25,000 a year. In addition there are often situations where the family is receiving TANF benefits in combination with the student receiving SSI.

It is important to remember that the family's economic status and plans are going to be impacted by the employment plans of the young person who is receiving SSI. The intertwining of the family's benefits with the SSI benefits requires a very complete benefits counseling process. The family's economic plans and the impact of work and independence for the young adult must be considered in the total family plans so that the individual can make informed choices.

There are often cultural as well as economic considerations that will affect the role and functions the young person is expected to meet in the family and community. These factors must be understood in order to provide benefits and vocational rehabilitation counseling in the appropriate context.

School Drop Outs

The drop-out rate from secondary education for students with disabilities demonstrates the need for vocational rehabilitation to make connections with students and their families early in the students' high school program. When a connection is made with the students, there is opportunity for VR to continue a relationship with those who drop out of school.

Students with emotional disabilities have the highest drop-out rates. This fact points to the need for VR to also establish ties with community mental health and other agencies, such as the youth services system, that are likely to serve this population.

The VR program also needs to consider being an active partner in drop-out prevention and intervention programs, as well as alternative education programs for students with disabilities.

New Eligibility for SSI and SSDI for Young Adults

For many young adults with disabilities, the first time they apply for SSI and/or SSDI will be at their 18th birthday. This is true since many individuals who may have met the medical listings prior to their 18th birthday may not have met the income criteria for SSI until they are considered adults and only their own income and resources are considered for SSI. Young adults may be eligible based on their parents' eligibility for SSA benefits. The vocational rehabilitation counselor plays a critical role for these individuals since they may be the first person to recommend consideration of application for SSI/SSDI and be able to assist the young adult to gather the medical, psychological, and vocational information necessary for their application to SSA.

Postsecondary Education and Training

VR counselors need to work with benefits counselors to provide training for colleagues in the special education system and postsecondary education institutions, particularly in offices for students with disabilities. The changes that have been made through the Ticket to Work program, along with potential changes in Medicaid eligibility and other state and local programs, are often not known in secondary and postsecondary education. Orientating fellow professionals to these programs is critical in creating a wider understanding of the potential of these programs to assist young adults in continuing their education and career development.

It is particularly important to pay close attention when young adults are receiving a significant array of support services, such as durable medical equipment, personal care assistance, home maker services, outpatient therapies, and medications. Since these are often covered under special education or children's health programs as the young person transitions to adult services, not only will the providers of these services often change but also there will be changes in the payment structure, method of payment, and condition of treatment under Medicaid and similar programs. As the issues needing to be coordinated for young persons become more complex, more time is required for planning and orientation for the young persons and their family.

Vocational rehabilitation should be involved with the students, their family, the school, and other community agencies that will be providing services to the young persons at least 24 months prior to the completion of a secondary education program. In complex cases, where residential services and similar intensive services are needed, consideration should be given to starting the planning process at least 36 months prior to the completion of the school program since there will often be a need to develop community options for independent living as well as vocational services for those students. (VR services are individualized to the specific needs of the individuals and these guidelines may not be appropriate for every person served.)

Student Earned Income Exclusion (SEIE)

The Social Security Administration is considering making changes to the income allowed by young adults while in postsecondary education, and it would appear that the types of incentives will continue to be modified in the future. It is therefore critical that benefits counseling be available on an ongoing basis throughout the postsecondary and career development phases for young adults. (If you wish to keep track of this, you can go to the website http://www.ssa.gov.)

SSI Population Ages 18-21

The SSA Annual Statistical Supplement Report (1999) shows that as of December, 1998, 5.5 percent of SSI recipients were in the 18-21 age range. This means that approximately 235,000 young adults are receiving SSI benefits. The three major disability categories for 86 percent of this population are mental retardation (52%), mental health disorders (22%), nervous system disorders (12%).

Additional information on students transitioning to work can be found in Chapter 6.

Chapter 6

Resources for the Vocational Rehabilitation Counselor

Introduction

This chapter provides resources intended to serve as:

- Source information/entry points for rehabilitation professionals to efficiently locate benefits counseling information specific to emerging legislation, regulations, research, and programs. Each of these starting points will lead to an expansive assortment of additional information. (All resource information included in this document is current as of November, 2000.)

- Sample forms for use in the benefits counseling process.

Social Security Administration Resources

Graduating to Independence (GTI) is a multimedia public information package developed to assist young people with disabilities in making the transition from school to the workplace. The package provides students and their caregivers, teachers, and counselors with clear information about Social Security disability programs, health insurance coverage, and work incentives.

The Graduating to Independence program is being revised and updated. Watch the SSA website for the announcement of when the new GTI package will be available and how to order copies. Http://www.ssa.gov/work/Youth/gradind.

Project ABLE (Able Beneficiaries Link to Employers) is a national resume bank that provides employers with an easily accessible applicant pool of qualified job-ready individuals who are ready, willing, and very interested in working. The resume bank operates through the joint efforts of the Office of Personnel Management (OPM), Social Security Administration (SSA), Rehabilitation Services Administration, Department of Veterans Affairs (VA) and State Vocational Rehabilitation (VR) agencies. The goal is to provide employers convenient access to quality human resources while providing training and employment services to eligible people with disabilities.

A diverse workforce gives organizations a competitive advantage by enabling them to better meet the needs of their customers and hire from an expanded labor pool. People with disabilities are the nation's largest minority, yet many employers have indicated that they cannot always find candidates with disabilities when vacancies occur. Project ABLE provides that link. Further, various tax incentives are available to businesses that hire people with disabilities. You can learn more by contacting the IRS at (800) 829-1040.

Project ABLE is a resume bank of persons receiving Social Security disability benefits who are prepared and want to work. State certified VR and VA counselors evaluate potential candidates and make the initial determinations to verify their "job-ready" status and basic qualifications for the chosen positions in the labor market. The counselors complete a simple enrollment worksheet, attach the candidate's resume, and enter the data in the Project ABLE resume bank. Employers access Project ABLE by telephone, fax, or email to obtain the resumes of these highly motivated individuals.

How can job seekers enroll in Project ABLE? Social Security beneficiaries who wish to enroll should contact their local VR or VA agency. Counselors will assess them to determine if they are ready for employment and enroll them. If a person is not ready for enrollment, the VR or VA agency may be able to offer training or other services that will help the individual prepare for work.

How do employers access Project ABLE? As vacancies occur, employers send a position description or job announcement to Project ABLE staff at OPM. After the matching process (usually within 24 hours), OPM will respond by forwarding the resumes of qualified individuals. Employers can initiate the process using the following options:

- Telephone: (757) 441-3362
- Fax: (757) 441-3374
- Email: projable@opm.gov

Federal employers can dial OPM's Automated Applicant Referral System at (912) 757-3150. Project ABLE is worksheet Number 6. A valid agency identification code (ID) is needed to access the system. If you wish to gain access and do not have an ID, call OPM at (912) 744-2085.

For more information, contact SSA's Project Leader, Regina Sajauskas, (410) 965-5381 or (410) 966-6210 [TDD]. Also information on Project ABLE can be found on the Internet at http://www.ssa.gov/work/Employers/able.html. Source: Social Security Administration (2001).

WorkWORLD©: Empowerment Through Decision Support Technology. WorkWORLD is decision support software for personal computers designed to help people with disabilities, advocates, benefit counselors, and others explore and understand how to best use the work incentives associated with the various federal and state disability and poverty benefit programs. It automates the computation of benefits, and takes into account the complex interaction of income, benefit programs, and work incentives, permitting individuals to explore individualized options that lead to greater independence, self-determination, and informed choices.

Initially developed by the Employment Support Institute (ESI) at Virginia Commonwealth University (VCU), the software is currently being enhanced and distributed by ESI under a contract funded by the Social Security Administration. Future versions will incorporate a larger number of federal and state benefit programs as well as more complex state differences into the software.

The beneficiary and their family/advocate will be prompted to answer a series of questions specific to their current situation. Their answers generate a set of results showing benefits, earned and unearned income, and expenses, as well as notes and recommendations related to the current situation. The user can then create a "what if" situation, changing a variable (more wages, start a PASS) in their current situation to test what may happen in the future.

WorkWORLD v.3.5.1©. This download contains all the files necessary to install the latest version of WorkWORLD onto your PC. You may download WorkWORLD from the following website at no cost to you. If you are unable to download WorkWORLD, you may request a copy of the software on CD-ROM. Currently, funding allows for limited free distribution of WorkWORLD on a CD-ROM. Upon request, a copy of the software on alternate media (3.5" disks) may be available for potential users who are unable to use the CD-ROM. (http://www.workworld.org//howtogetWW.html).

The Employment Support Institute at Virginia Commonwealth University's School of Business is launching a new training program in 2001 for people with disabilities and advocates who want to learn how to most effectively use WorkWORLD decision support software. Distance training is an effective way for people to gain knowledge and skills through web-based media. Currently, there is one Distance Learning Module, comprised of 14 lessons, available for your use. Each lesson is also available for you to listen to via streaming audio.

Virginia Commonwealth University contact information:

Employment Support Institute
VCU School of Business
1015 Floyd Avenue
P. O. Box 844000
Richmond, VA 23284-4000

804-828-1992 (phone)
804-828-8884 (fax)
Email: esi@vcu.edu
Website: http://www.vcu.edu/busweb/esi/trtaining/overview.html

Additional Social Security Administration Resources:

- Social Security Online
  http://www.ssa.gov

- Social Security Administration Plan for Achieving Self-Support (PASS)
  http://www.ssa.gov/work/ResourcesToolkit/generalinfo.html

- Social Security Administration SSA Publication No. 65-008, ICN 958392, *Social Security Handbook: Your Basic Guide to the Social Security Programs, 14th Edition.*
  http://www.ssa.gov/html

- Social Security Administration SSA Publication No. 64-030, ICN 436900, *Red Book on Employment Support: A Summary Guide to Employment Support Available to People With Disabilities Under the Social Security Disability Insurance and Supplemental Security Income Programs.*

Student/Transition Resources

Some special education students are eligible for Supplemental Security Income (SSI) work incentives through the Social Security Administration. These work incentives could be included in IEP development and support the transition process through community-based vocational training and other employment options. To obtain detailed information about eligibility and this program, contact the local Social Security office.

The following companion resource guides are intended for school personnel and other individuals involved in the transition planning process for students with disabilities:

Meeting the Needs of Youth with Disabilities: Handbook on Supplemental Security Income Work Incentives and Transition Students. (1998)

Meeting the Needs of Youth With Disabilities: Examples of Students With Disabilities Accessing SSI Work Incentives (1999)

These publications were jointly developed by The Study Group, North Carolina; the SSI Work Incentives and Transition Youth Project at the Institute on Community Integration;

and the National Transition Network. Available from the Institute on Community Integration, University of Minnesota, Minneapolis, MN.
URL: http://ici2.umn.edu/ntn/pub/default.html

In addition, the National Transition Network (NTN) has several publications describing benefits available under the Social Security System for individuals with disabilities. These Supplemental Security Income benefits include Plan for Achieving Self-Support (PASS), Individualized Work Incentive Program, The Student Earned Income Exclusion, and Property Essential to Self-Support (PESS).
URL: http://ici2.umn.edu/ntn/default.html

Government Resources

Medicaid Infrastructure Grant: To Support the Competitive Employment of People with Disability. One of the primary reasons cited by people with disabilities as a barrier to not entering, or returning, to the work force is the fear of losing health insurance. If an increase in household income can jeopardize this essential health care, employment (and the possible resulting loss of Medicaid coverage) becomes less attractive, if not potentially life threatening. The Medicaid Infrastructure Grants represent an innovative approach that will enable states to build needed systems to help people with disabilities purchase health coverage through Medicaid. States will also use grant funds to assist employers more directly access this underused pool of workers, conduct outreach to people with disabilities, train staff in new employment possibilities, and improve transportation and other supports for people with disabilities.

Section 203 of the Ticket to Work and Work Incentives Improvement Act of 1999 directs the Secretary of the Department of Health and Human Services (DHHS) to establish a grant program for the design, establishment, and operation of state infrastructures that provide items and services to support working individuals with disabilities. The Health Care Financing Administration (HCFA) is the designated DHHS agency with administrative responsibility for this grant program (http://www.hcfa.gov/medicaid/twwiia/faqinfra.htm).

U.S. Department of Labor. This site provides comprehensive information on the Ticket to Work and Work Incentives Improvement Act including a summary of the act from the Presidential Task Force on Employment of Adults with Disabilities. URL: http://www.dol.gov.

U.S. Workforce.Org. This site provides information on the Workforce Investment Act (WIA) legislation and final regulations, policy-related information, one-stop system, WIA State Plans, and access to America's Job Bank. URL: http://www.usworkforce.org/wia.

General Resources

- Cornell Program on Employment and Disability (PED)

  Will Expanded Health Care Coverage for People with Disabilities Increase Their Employment and Earnings?

  New York State School of Industrial and Labor Relations
  Extension Division
  Cornell University
  Ithaca, NY 14853-3901
  607/255-7727 (voice)
  607/255-2763 (fax)
  607/2891 (tty)
  Email: ilr ped@cornell.edu
  Website: http://www.ilr.cornell.edu/ped/organization/facultyped.html

- The Center on Budget Priorities

  EIC Outreach Kit (1999)

  820 First Street NE, Suite 510
  Washington, DC 20002
  202-408-1080
  www.cbpp.org

- Employment Support Institute

  Providing supports for better decision-making about employment options and policies affecting people with disabilities.

  http://www.vcu.edu/busweb/esi

- Cornell University

  Social Security Administration and Work Incentive Programs: Building Blocks to Employment

  Program on Employment and Disability
  102-107 IRL Extension
  Cornell University
  Ithaca, NY 14853-3901
  607-255-7727

Benefits Assessment Checklist

Name: ____

Source(s) of Income and Monthly Amount(s):

$________ Social Security Disability Insurance (SSDI)
$________ Supplemental Security Income (SSI)
$________ Veteran's Benefits
$________ Annuity
$________ Dividends
$________ Private Disability Insurance
$________ Food Stamps
$________ State Financial Assistance (describe) ____________________
$________ Other (describe) ______________________________

	Yes	**No**	**Unknown**
Does the individual live in subsidized housing?	____	____	____
Does the individual have Medicare coverage?	____	____	____
Does the individual have Medicaid coverage?	____	____	____
Is the individual presently working?	____	____	____
Has the individual worked in last 5 years?	____	____	____
Is the individual married?	____	____	____
- If yes, does the spouse receive assistance from state or federal sources?	____	____	____
Does the individual have children?	____	____	____
- If yes, do the children receive benefits from the Social Security Administration (SSA)?	____	____	____
- If yes, does the family receive any Temporary Assistance for Needy Families (TANF)?	____	____	____
Does the individual have significant disability and/or medical expenses?	____	____	____
Is the individual using a PASS?	____	____	____

Counselor: ______________________________ Date: __________

Illustration I
Comprehensive Benefits Support Plan

Name: ____________________ **SSN:** ____________

Address: ______________________________

Phone: __________ **Fax:** __________ **E-mail:** __________

Explanation of Need for Support:

Activities	**Time Frames**	**Person/Agency Responsible**	**Role**

Desired Outcomes	**Resources Needed**

Quality Indicators of Success:

Illustration II
Comprehensive Benefits Support Plan

Name: John B. Recipient **SSN:** 000-00-0000

Address: 000 Security Boulevard, Baltimore, Maryland 00000

Phone: (000) 000-0000 **Fax:** (000) 000-0000 **E-mail:** B/R000@outlook.com

Explanation of Need for Support: John has expressed a need for support in reporting monthly work expenses and earnings on a regular basis. He has received termination notices in the past based on assumptions made on the part of SSA when he did not report his expenses and earnings information in a consistent manner.

Activities	Time Frames	Person/Agency Responsible	Role
Benefits counseling	Monthly	Peer Advocates R-Us / Joe Kewl	Provide benefits consultation and initially conduct monthly reporting to SSA.
John will compile and bring expense receipts and pay stubs to monthly counseling sessions.	Weekly/ Monthly	John B. Recipient	Assemble Handi-Transport receipts at end of each day in file by door. Put pay stubs in file weekly. Take monthly to counseling session.

Desired Outcomes	Resources Needed
Joe will support John in gradually implementing a self-management strategy for reporting monthly impairment-related work expenses and gross monthly earnings to SSA in a consistent manner. John will consistently report expenses and earnings to SSA with only a verbal monthly prompt. Joe will get to a point where he is initiating follow-up calls to the SSA Claims Rep every other month to check reporting.	– Monthly postage provided by John. – Reimbursement for counseling sessions provided by State VR Program. – Buy-in from Claims Rep – Copy of Support Plan provided along with monthly check-ins.

Quality Indicators of Success:

- John will utilize a personal filing system at home.
- SSA Claims Rep will support self-management plan.
- Peer Advocates R-Us will gradually reduce support while still maintaining oversight of management plan.
- John will gradually assume responsibility for consistently reporting weekly expenses and monthly earnings to SSA minimizing the occurrence of potential crisis benefit situations.

Post-Employment Follow Up New Hire ________

Date ____________________ Post 90 Days _____

Name ______________________________ Phone Number ____________________

Best Time to Reach Individual ____

Address ____

____

Sex ____ M ____ F DOB ___________ SS# ________________________

Benefits: SSI ___ Y ___ N SSDI ___ Y ___ N State Supplemental ___ Y ___ N

Employer ____

Address ____

____

Job Title ____

Start Date ________________ Shift ________________ Hr/Wk ________________

Medical Benefits Through Employer ____ Y ____ N ____ Pending

(or) ____ Medicare ____ Medicaid (Title XIX)

Key Issues in Follow-Up/Questions to ask ____________________________________

____

____

____

Contacts (if individual cannot be reached)

Name	Relationship	Phone #	Best Time to Reach

Referring Counselor ________________________ Phone Number ________________

Date of Last Contact __________________

Frequency of Contacts ____

Post-Employment Follow Up

Counselor ______________________________ Phone Number ________________

Name ________________________ Phone Number ___________________________

Address ____

Personal Info: Sex _____ SS#_____________ DOB_________ S.S. Benefits ______

Employer ____

Employer Address ____

Job Title ____

Medical Benefits (Type) ____

Start Date __________ Shift __________ Hours per Week ____ Pay Rate________

Alternate Contact Person ____

Memo to Counselor: Important issues that counselors should be notified of.

Date of next contact or assigned contact person.

Interviewer Signed ________________________________ Date _____________

SSI/SSDI Comparison Pre- and Post-Ticket to Work and Work Incentives Improvement Act of 1999

SSI

Earned Income Exclusion	Same
Impairment-Related Work Expenses (IRWE)	Same
Subsidies	Same
Continued Payment Under a Vocational Rehabilitation Program - 301	Same
Student Earned Income Exclusion	Same
Plan for Achieving Self-Support (PASS)	Same
Section 1619 (A) and (B)	Same
Continuing Disability Review (CDR)	New - Suspension of Disability Review - Section 1148(I) - When ticket is used
Re-Entry to SSI - Within 12 months of end of 1619 (B) status reinstatement of benefits After 12 consecutive months of loss of eligibility new application required	Same - reinstatement within 12 months New - request for reinstatement can be made within 60 months of termination of benefits. Provisional benefits provided up to 6 months while decision on reinstatement is being made. Provisional payments not considered overpayment. The CDR standard both medical and financial will be used to make the determination of reinstatement.

SSDI

Earned Income Exclusion	Same
Impairment-Related Work Expenses (IRWE)	Same
Continued Payment Under a Vocational Rehabilitation Program - 301	Same
Trial Work Period - 9 months of SGA in 5-year period	Same - Note Section 301 allows for demonstration project authority that allows for projects that look at alternative approaches including reduction of benefits.
Plan Achieving Self-Support (PASS)	Same
Continuation of Medicare Coverage - 39 months after trial work	New - up to 93 months after trial work
Medicare for people with disabilities who work	Same
Continuing Disability Review (CDR)	New - Suspension of Disability Review - Section 1148(I) - when ticket is used. New - work activity for SSDI beneficiaries who have received benefits for at least 24 months will not trigger a CDR and no-work activity engaged in may be used as evidence that the individual is no longer disabled.
Extended Period of Elibibility (EPE) - a beneficiary may be reinstated any time for the 36 months following the end of the trial work period if earnings fall below the SGA level.	Same - reinstatement within 36 months. New - request for reinstatement can be made within 60 months of termination of benefits. Provisional benefits provided up to 6 months while decision on reinstatement is being made. Provisional payments not considered overpayments. The CDR standard both medical and financial will be used to make the determination of reinstatement.

Epilogue

Epilogue

Introduction

The underlying principle of this document is that combining state-of-the-art vocational rehabilitation practices with a benefits consultation strategy can achieve continued economic success for SSI/SSDI beneficiaries.

Workforce Attachment

The term workforce attachment embodies the idea that it is important to assist persons to maintain a continuous connection with employment and economic activity. Individuals will define themselves as workers and seek to have a positive relationship with employment even in times of job and career change.

The goal of the workforce attachment concept is to ensure that individuals not only enter the workforce but also have access to the opportunities that the economic structure provides for advancement and increased economic rewards. The disadvantages for individuals who do not have the supports and services to move within the economic system is that they can become only "marginally attached" to the labor market and /or "visibly underemployed." Marginally attached refers to individuals who work sporadically and often are so discouraged with limited work opportunities as to discontinue looking for employment. Visibly underemployed refers to individuals who work mainly at part-time and other limited work even though they would prefer full-time employment. Individuals with disabilities can often be included in both of these groups.

Vocational rehabilitation needs to provide programs and services that will help ensure a meaningful workforce attachment for all individuals. In the case of SSI and SSDI beneficiaries, it could be stated that the most significant portion of the vocational rehabilitation process occurs once the individual with a disability makes the initial entry into the workforce. It is the ability to assist the individual to develop and maintain an effective role within the economic system that is the real goal of vocational rehabilitation.

System Recommendations

The following recommendations are intended to focus on the organizational structures within which the vocational rehabilitation counselors and other staff function. The purpose of these suggestions is to create organizations in which the ideas presented in this document can most effectively be practiced. It is also hoped that positive organizational approaches will bring about even more innovation in the delivery of vocational rehabilitation services for SSI/SSDI beneficiaries.

Rehabilitation Services Administration (RSA)

- **Outcome measures**. RSA should consider the emphasis it is placing on the type and number of employment outcomes achieved by SSI/SSDI beneficiaries with particular attention to recognizing program achievements at SGA.
- **Work incentive liaisons**. RSA could consider establishing work incentive liaison duties in the regional offices. These individuals could provide technical assistance to states regarding SSA and other federal programs such as Medicaid, Medicare, and housing that affect individual's benefits and employment options.
- **RSA/SSA/CSAVR projects**. The interagency agreement among these parties should continue to lead to the development of projects that foster innovation and special programs for populations within the larger SSI/SSDI population.

State Vocational Rehabilitation Agencies

- **Strategies for benefits counseling**. It is essential that agencies develop strategic plans to ensure that a benefits counseling structure is available within the state. The VR agency should play the primary role in the design and development of the benefits counseling plan since it is the coordination of the benefits counseling system with vocational rehabilitation that will provide the services to the widest range of SSI/SSDI beneficiaries. There are numerous ways that benefits counseling systems can be designed and funded, but it is critical that one exists. A primary assertion of this document is that it is not possible on a large scale to combine the roles of vocational rehabilitation counselor and benefits specialist into one position. These are both complex functions that are complementary.
- **Strategic planning**. States need to evaluate their effectiveness in serving the SSI/SSDI beneficiaries and consider factors as acceptance and plan rates and the level of competitive employment at the SGA level for beneficiaries.
- **Improvement of outreach processes**. States need to develop various approaches

to ensure continuous outreach to the SSI/SSDI population. Experience demonstrates that it is critical to do multi-level outreach to this population since it is difficult to predict when an individual will engage in the VR program. There are early intervention approaches at the time of application for benefits as well as approaches following a period of time on benefits.

- **Staffing patterns**. Depending on resources within a state, it is important to consider the types and number of positions that will be needed to achieve the state's plans to serve the SSI/SSDI population. States need to consider how to balance the needs for vocational rehabilitation counselors, benefits specialists, follow-up supports, and other resources. The availability of VR reimbursement and outcome payments as sources of revenue to fund staff may offer some ability to increase staff.

- **Incentives for counselors**. States should consider programs that encourage VR counselors and others to assist SSI/SSDI beneficiaries. One option is the use of bonus approaches shared with the key staff and providers involved in the provision of VR services leading to reimbursement or payment. The ability of counselors and others to utilize some of the income gained for training, education, equipment, or special projects may also be incentives. Providing counselors and others with a report on the income gained and its uses to improve and/or expand services should be considered.

- **Skill development**. The provision of continued training and knowledge development will be critical in the rapidly changing world of benefits and programs with particular emphasis on Medicaid options, work incentives, and return to work strategies. There will be an increased need for cross-training with SSA, workforce agencies, and other programs that are partners in the provision of services. VR agencies need to consider their role as providers of training and technical assistance.

Funding Options

Table 3 provides a number of potential approaches to funding some of the models and concepts presented in this document. It is our hope that this will lead to further innovation.

Table 3
Funding Options for Benefits Counseling and Other Support Services

Sources of Funding	Services
VR Section 110 Funds The basic vocational rehabilitation funds can be utilized for activities directly related to the outreach, engagement, and provision of VR services.	**Outreach**: Includes information, education, and other activities that will provide information to SSI/SSDI beneficiaries. This could include web sites and other information systems. **Benefits counselors**: The funding of staff and/or the purchasing of benefits counseling as part of the services to VR applicants and beneficiaries. **Staff training**: The development and implementation of training materials regarding benefits. **Informative benefits**: Services such as follow-up systems and 1-800 lines, newsletters.
SSA - VR Reimbursement Funds These funds can be utilized in the same fashion as Section 110 funds.	Same as 110 Funds. **Reward systems and incentives** to staff/providers (Kentucky model). Special Projects such as part funding with other agencies.
I and E Funds	Innovative approaches to start projects such as Benefits Counseling positions. Follow-up systems.
General and Foundation Grants SSA, RSA, DOL, HCFA	Depending on the grant purpose, these have been used for benefits counseling systems and demonstration projects.

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Appendix A

Glossary

Many of the terms in this document will be familiar to experienced VR counselors, but newer counselors may not have had exposure to them. Listed on the next several pages are key SSDI and SSI terms, benefits programs, work incentives, and special rules for people who are blind.

Key SSDI and SSI Terms

Substantial Gainful Activity (SGA)	■ SSA evaluates the work activity of persons claiming or receiving disability benefits under SSDI, and/or claiming benefits because of a disability (other than blindness) under SSI. ■ Earnings guidelines are used to evaluate work activity to decide whether the work activity is substantial gainful activity and whether a person is considered disabled under the law. ■ For individuals with disabilities, other than blindness, earnings averaging over $740 per month generally demonstrate the SGA standard. ■ For individuals with blindness, earnings over $1,240 ordinarily demonstrate SGA. ■ The SGA standard for individuals who are blind is adjusted annually to reflect changes in general wage levels.
Disability as defined for SSDI and SSI	■ The inability to engage in any SGA because of a medically determined physical or mental impairment(s) that: ▪ Can be expected to result in death or ▪ Has lasted or can be expected to last for a continuous period of not less than 12 months.
Blindness	■ Central acuity of 20/200 or less in the better eye with best correction, or a limitation in the field of vision in the better eye so that the widest diameter of the visual field subtends an angle of 20 degrees or less (tunnel vision). ■ For SSDI this condition has to have lasted or be expected to last at least 12 months. ■ The SSI program has no duration requirement for blindness.

Continuing Disability Review (CDR)	■ A review conducted by Social Security to determine whether there is medical improvement in an individual's condition or if the person can perform SGA. ■ SSA schedules CDRs at various frequencies based on whether medical improvement is expected. ■ SSA also conducts CDRs at the time it receives information that an individual may have medically improved.

Benefit Programs

Social Security Disability Insurance Title II [2] (SSDI)	■ Social Security Disability Insurance provides benefits to disabled or blind individuals who are "insured" by workers' contributions to the Social Security trust fund. These contributions are the Federal Insurance Contributions Act (FICA) social security tax paid on their earnings or those of their spouses or parents. ■ Eligibility for SSDI is based upon meeting the disability criteria. There are no financial eligibility criteria for SSDI. ■ Persons who are eligible are referred to as "beneficiaries" because they are using insurance benefits.
Supplemental Security Income Title XVI [16] (SSI)	■ The Supplemental Security Income Program makes cash assistance payments to aged, blind, and disabled people (including children under age 18) who have limited income and resources. The federal government funds SSI from general tax revenues. Some states pay benefits to some individuals to supplement their federal benefits. ■ There is both financial and disability criteria for SSI eligibility. ■ Persons who are eligible are referred to as "recipients" because they are receiving cash benefits.

Concurrent SSDI/SSI	■ This term refers to persons who are simultaneously eligible for claiming SSDI and SSI. ■ The person can receive cash benefits for both programs.
Medicare	■ Federal health insurance is available to individuals who are receiving Social Security benefits due to retirement or disability. ■ SSDI beneficiaries usually need to wait 24 months after eligibility determining before Medicare coverage is available.
Medicaid Title XIX [19]	■ Jointly funded federal-state health insurance for low income and needy people. ■ Covers children, the aged, blind, and/or disabled, and others eligible to receive federally assisted income maintenance payments. ■ Most SSI recipients are eligible for Medicaid.

Impairment-Related Work Expenses	■ Deductible cost of items and services needed to work because of impairment when engaging in SDA.
Subsidies and Special Conditions	■ SSA terms for support individuals receive on the job that may result in more pay than the actual value of the services performed. The value of subsidies and special conditions is taken into account when determining if countable earnings demonstrate SGA.
Unincurred Business Expenses (self-employed only)	■ SSA term for self-employment business support that someone gives an individual without cost to the individual. Unincurred business expenses are deducted from net earnings when determining if countable earnings demonstrate SGA.
Unsuccessful Work Attempt	■ SSA term for an effort to do SGA that stopped or was reduced below the SGA level after a short time (6 months or less) because of the individual's impairment or special conditions related to the impairment that were essential to further performance of the work. Earnings during an unsuccessful work attempt are not counted when determining if countable earnings demonstrate SGA.

SSDI Work Incentives

Trial Work Period (TWP)	■ The TWP allows an individual to test their ability to work for at least 9 months. During the TWP, full SSDI benefits are received regardless of how high earnings might be so long as the individual has a disabling impairment. ■ Starts with the first month of eligibility for SSDI benefits or the month in which they file for benefits, whichever is later. ■ Continues until the individual accumulates 9 months (not necessarily consecutive) in which they performed "services" within a rolling 60-consecutive-month period. Work is considered to be "services" if more than $530 a month is earned or more than 80 self-employed hours are worked in a month. (The dollar amount is adjusted each year based on the national average wage.)
Extended Period of Eligibility (EPE)	■ Reinstatement of Benefits - the 36-consecutive-month period that immediately follows the trial work period during which SSDI benefits are reinstated for any month(s) earnings fall below the SGA level, so long as the individual continues to have a disabling impairment(s). No new application and/or disability determination is required.
Continuation of Medicare Coverage	■ The provision that allows up to 93 consecutive months of hospital and medical coverage to continue after the end of the trial work period when an individual engages in SGA, so long as the individual continues to have a disabling impairment(s). The individual pays no premium for hospital insurance. Although the individual's cash benefits may cease due to SGA, he or she has the assurance of continued health insurance.

Medicare for People With Disabilities Who Work	■ The purchase of Medicare coverage after premium-free Medicare coverage ends, if Medicare stopped due to work and the individual has not medically recovered and has not reached age 65. (Some people with low incomes and limited resources may be eligible for state assistance with these Medicare premium costs.

SSI Work Incentives

Earned Income Exclusion	■ The first $65 of an individual's earnings plus one-half of the remaining earnings are not counted when figuring the individual's SSI payment amount.
Student Earned Income Exclusion	■ Up to $1,290 of earned income per month is not counted when figuring their SSI payment amount if the individual is under age 22, not married or head of the household, and regularly attending school. The maximum yearly exclusion is $5,200.
Plan for Achieving Self-Support (PASS)	■ A PASS allows an individual to set aside income and/or resources for a specific time toward a work goal, such as money for education, vocational training, or starting a business. The income set aside under a PASS does not count in figuring the individual's SSI payment amount. Resources set aside under a PASS do not count when determining the individual's initial or continuing eligibility to SSI. A PASS can help establish or maintain SSI eligibility and can increase the individual's SSI payment amount.
Special SSI Payments for People Who Work; Section 1619(a)	■ Work incentive provision that allows for continued SSI payments to an individual with a disability even when earned income is at the SGA level. To qualify the individual must have been eligible for an SSI payment for at least one month before working at the SGA level, still be disabled, and meet all other eligibility rules, including income and resources tests.
Continued Medicaid Eligibility; Section 1619(b)	■ Work incentive provision that allows Medicaid coverage to continue to an individual with a disability even when earned income along with other income become too high for SSI cash payments. To qualify the individual must have been eligible for an SSI cash payment for at least one month; still be disabled; still meet all other eligibility rules, including the resources test; need Medicaid in order to work; and have insufficient gross earned income (a threshold amount) to replace SSI, Medicaid, and any publicly funded attendant care.

Special Rules for People Who Are Blind

SGA Under SSDI	■ The SGA level for beneficiaries who are blind changes every year to reflect changes in general wage levels. The SGA amount ($1,240) is higher than the current guidelines for non-blind disabled workers.
SGA and SSI	■ SGA does not apply to people who are blind under SSI. Their eligibility continues until they medically recover or SSA ends their eligibility because of a nondisability-related reason.
Blind Work Expenses (BWE) Under SSI	■ Earned income that an individual with blindness uses to meet expenses needed to earn that income is not counted in determining the individual's SSI eligibility and SSI payment amount. BWE items do not have to relate to the individual's blindness. When figuring the SSI payment amount Impairment-Related Work Expenses (IRWE) are treated as BWE because it always results in a higher SSI payment for the individual.

Appendix B

Ticket to Work and Work Incentives Improvement Act (TWWIIA) of 1999

Introduction

The most recent SSA legislation, PL 106-170, the Ticket to Work and Work Incentives Improvement Act (TWWIIA) of 1999, is one of the most significant changes in disability policy in the last 20 years. It will help lessen the fears of individuals receiving SSDI and SSI about losing health care coverage and income during attempts to work and provide enhanced work incentives, outreach activities, and new service structures. It expands the pool of service providers beyond the state agency structure and offers innovative ways for service providers to receive funds for successful employment of individuals receiving SSDI and SSI. The provisions of TWWIIA become effective at various times, generally beginning one year after enactment.

Features of TWWIIA That Will Have an Impact on Vocational Rehabilitation Consumers

Establishment of the Ticket to Work and Self-Sufficiency Program

The program will be phased in nationally over a three-year period beginning January 1, 2001, with the first "Tickets" issued early in 2001. SSI/SSDI beneficiaries will receive a ticket they may use to obtain vocational rehabilitation, employment, or other support services from an approved provider of their choice. The ticket program is voluntary.

Under TWWIIA, each state agency administering or supervising the administration of the state plan approved under Title I of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.) may elect to participate in the program as an employment network with respect to a disabled beneficiary. If the state agency does elect to participate in the program, the state agency also shall elect to be paid under the outcome payment system or the outcome-milestone payment system. With respect to a disabled beneficiary that the state agency does not elect to have participate in the program, the state agency shall be paid for services provided to SSI/SSDI beneficiaries under the present system for reimbursement.

Expanded Availability of Health Care Services

TWWIIA includes several enhancements to Medicaid and Medicare that became effective October 1, 2000. States will have the option to provide Medicaid coverage to more people ages 16-64 with disabilities who work.

States will have the option to permit working individuals with incomes above 250 percent of the federal poverty level to buy in to Medicaid. TWWIIA creates a new Medicaid buy-in demonstration project to provide medical assistance to workers with impairments who are not yet too disabled to work The law also extends Medicare coverage for people with disabilities who return to work. It extends Part A premium-free coverage for 4 ½ years beyond the current limit for SSDI beneficiaries that return to work.

Expedited Reinstatement of Benefits

Effective January 1, 2001, when a person's SSDI or SSI disability benefits have ended because of earnings from works, they would be able to request reinstatement of benefits, provided the beneficiary becomes unable to work because of a medical condition. They must file the request for reinstatement with Social Security within 60 months from the month of termination. While Social Security is making a new determination, beneficiaries may receive up to six months of provisional benefits, including Medicare and Medicaid. If Social Security determines that the medical condition no longer prevents the individual from working, the provisional benefits paid would not be considered an overpayment.

Continuing Disability Reviews

Effective January 1, 2001, Social Security cannot initiate a continuing disability medical review while a Social Security or SSI disability beneficiary is using a ticket. Cash benefits may be subject to termination if earnings are substantial.

Effective January 1, 2002, work activity by a Social Security disability beneficiary who has received Social Security disability benefits for at least 24 months could not be used as a basis for conducting a disability review. However, the individual would be subject to regularly scheduled medical reviews. Again, cash benefits may **be subject to termination if earnings are substantial.**

Where It Is Heading

In the coming months TWWIIA implementation will require a massive effort on the part of SSA and other service providers, including the VR program. There are several other initiatives and activities already under way, which will assist in and complement this task: task:

- Since 1996, the leadership of SSA, RSA, and the CSAVR has maintained a collaborative agreement. The agreement provides for work plans to evaluate and seek innovative–efficient mechanisms for improving current systems so that greater numbers of SSI/SSDI beneficiaries with disabilities will enter, return to, or maintain competitive employment consistent with their unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

- In 1998, SSA's State Partnership Initiative (SPI) awarded cooperative agreements to 12 states to develop projects to assist adults to enter the workforce The approved states are California, Illinois, Iowa, Minnesota, New Hampshire, New Mexico, New York, North Carolina, Ohio, Oklahoma, Vermont, and Wisconsin. RSA has also funded six similar projects in Alaska, Arkansas, Iowa, Utah, Colorado and Oregon.

- The 1998 amendments to the Rehabilitation Act ensure that SSI/SSDI beneficiaries are presumptively eligible to receive VR services.
- On March 13, 1998, President Clinton signed Executive Order No. 13078, which created The Presidential Task Force on Employment of Adults with Disabilities. The purpose of the Task Force is to create a coordinated and aggressive national policy to bring adults with disabilities into gainful employment at a rate that is as close as possible to that of the general adult population.

Appendix C

The Work Site

Office of Employment Support Programs

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Beneficiaries > Employment Support Representative

SSA PILOTS A NEW SERVICE POSITION, THE EMPLOYMENT SUPPORT REPRESENTATIVE (ESR)

In a major commitment to improve service to Social Security and Supplemental Security beneficiaries with disabilities who want to work, we recently began testing a new position called the "Employment Support Representative (ESR)". Our first group of ESRs is prepared to provide "world class" service to Social Security beneficiaries with disabilities who want to work.

ESR's received intensive training in Social Security work incentives and other SSA programs that can help our beneficiaries make that transition to work. The ESR serves as a technical resource for other SSA employees and conducts training and outreach to external organizations. The ESR also keeps informed about public and private organizations in the community that can provide employment services to our beneficiaries and their families.

We are piloting the ESR position in different models across the country in order to understand how SSA can best deliver this type of service. For example, in one model the ESR is located in a SSA field office and shares the same service area. In another model, the ESR is situated with the regional PASS cadre and serves a geographic area containing multiple field offices within the area served by the PASS cadre. The ESR pilot is designed to capture data about the ESR's claims workloads, training and outreach activities. We will survey individuals and organizations who received services from the ESR's, along with the ESRs, their managers and co-workers, to measure the pilot in terms of customer satisfaction and how the ESR improved our field operations.

Below is the list of the specific 54 locations that the ESRs serve and the ESRs' telephone numbers.

If you do not live in the service areas below, you can obtain information from your local field office or call Social Security toll free at 1-800-772-1213. If you do not know the location of your local field office, for assistance, visit

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https://s3abaca.ssa.gov/pro/fol/fol-home.html.

If You Live in this State and City		**Contact The ESR At This Number**
Arkansas	Little Rock	888-287-7845
Connecticut	Hartford	860-493-0386 ext. 3030
	East Hartford	860-493-0386 ext. 3030
	Bristol	860-493-0386 ext. 3030
	New Britain	860-493-0386 ext. 3030
California	Torrance	310-326-0393 ext. 216
Colorado	Denver	303-844-6766 ext. 3011
	Pueblo	719-545-3052 ext. 217
Delaware	Dover	800-551-9305
	Georgetown	800-551-9305
	Wilmington	800-551-9305
Florida	Melbourne	321-255-1553 ext. 215
Illinois	Chicago (South)	773-776-0127 ext. 234
Kansas	Wichita	316-636-1274 ext. 3205
Kentucky	Louisville	502-582-5290 ext. 3045
Louisiana	New Orleans (Westbank)	504-589-3637 ext. 3033
Massachusetts	Framingham	877-286-6050
Michigan	Grand Rapids	616-233-2205
	Jackson	888-674-6249

Missouri	Joplin	417-624-2542 ext. 3010
	St. Louis	314-436-7234 ext. 3051
Mississippi	Brookhaven	601-833-3951 ext. 204
Nebraska	Beatrice	800-551-9289
	Lincoln	800-551-9289
Nevada	Las Vegas	702-248-8576 ext. 3105
New Jersey	Trenton	609-989-0599 ext. 3008
New York	Patchogue	631-207-3340 ext. 223
	Dunkirk	888-352-9536
	Jamestown	888-352-9536
	Olean	888-352-9536
Oregon	Eugene	541-465-6838 ext. 203
South Carolina	Columbia	877-552-4565
South Dakota	Aberdeen	866-303-5861
	Huron	800-551-1034
	Pierre	800-551-1034
	Pine Ridge	800-551-1034
	Rapid City	800-551-1034
	Sioux Falls	800-551-1034
	Watertown	800-551-1034
	Yankton	800-551-1034
Texas	Lubbock	877-564-9053
	Plainview	877-564-9053
	San Antonio	210-472-4623

Vermont	Montpelier	877-603-0143
	Burlington	877-603-0143
	Rutland	877-603-0143
Virginia	Norfolk	877-610-4965
	Portsmouth	877-610-4965
	Suffolk	877-610-4965
Washington	Olympia	888-674-6251
West Virginia	Charleston	866-707-1791
	St. Albans	866-707-1791
Wisconsin	Madison	608-833-3852

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Appendix D

Plan for Achieving Self-Support General Information

What Is A Plan for Achieving Self-Support (PASS)?

- SSI provision to help individuals with disabilities return to work

How does a PASS help someone return to work?

- SSI eligibility and payment amount are based on income and resources (things of value that individual owns)
- PASS lets disabled individual set aside money and/or things he or she owns to pay for items or services needed to achieve a specific work goal

How PASS Works

- Applicant finds out what training, items or services needed to reach work goal.
- Can include supplies to start business, school expenses, equipment and tools, transportation and uniinformation requests.
- Applicant finds out how much these items and services will cost.
- PASS can help person save to pay these costs.
- PASS lets person set aside money for installment payments as well as a down payment for things like a vehicle, wheelchair or computer if needed to reach work goal.

Setting Up A PASS

- Contact local SSA office after deciding on work goal and determining items and services necessary to achieve to get a PASS form, "Plan for Achieving Self-Support," (SSA-545-BK) to complete.
- Bring or mail it to the Social Security office.
- Can get help in setting up plan from a vocational rehabilitation (VR) counselor, an organization that helps

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people with disabilities, the local Social Security office or anyone else willing to help him or her.

- SSA usually approves plans prepared by VR
- If goal is self-employment, must have business plan also

What Happens To The PASS

- SSA sends PASS to SSA employees who are trained to work with PASS.
- PASS expert works directly with the applicant.
- PASS expert looks over the plan to see if work goal is reasonable
- SSA reviews plan to make sure that items and services listed on PASS needed to achieve the work goal and reasonably priced.
- If changes needed, the PASS expert discusses with the applicant.
- If PASS not approved, can appeal the decision.

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Elements of a PASS

A PASS must:

Be in writing

- Preferred on form SSA-545
- Signed by the individual, and, if applicable, the representative payee

State a work goal

- Must be specific (e.g., carpenter, computer programmer)
- Can be VR assessment
- "Getting a degree" or "buying a car" are not acceptable goals
- Reasonable chance of achieving goal, considering strength and abilities

Contain a reasonable time frame

- Must have projected beginning and ending dates
- Must have milestones indicating interval steps
- Last step must indicate how job will be obtained

Have expenses that are necessary to achieve the work goal

- Must have additional expenses other than everyday living expenses
- Expenses must be reasonably priced
- Major expenses (e.g., vehicle) can be paid through down payment and installment payments
- Expenses must be paid by beneficiary

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The tools you need to find the information you seek

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Plan for Achieving Self-Support

PASS is a work incentive for SSI beneficiaries. This section contains information on PASS, the PASS form (SSA form 545) and contact information to locate members of the SSA .

- **Cadre Contact Information**
- **SSA Form 545 - Plan for Achieving Self-Support**
- **General Information on PASS**
- **Elements of a PASS**

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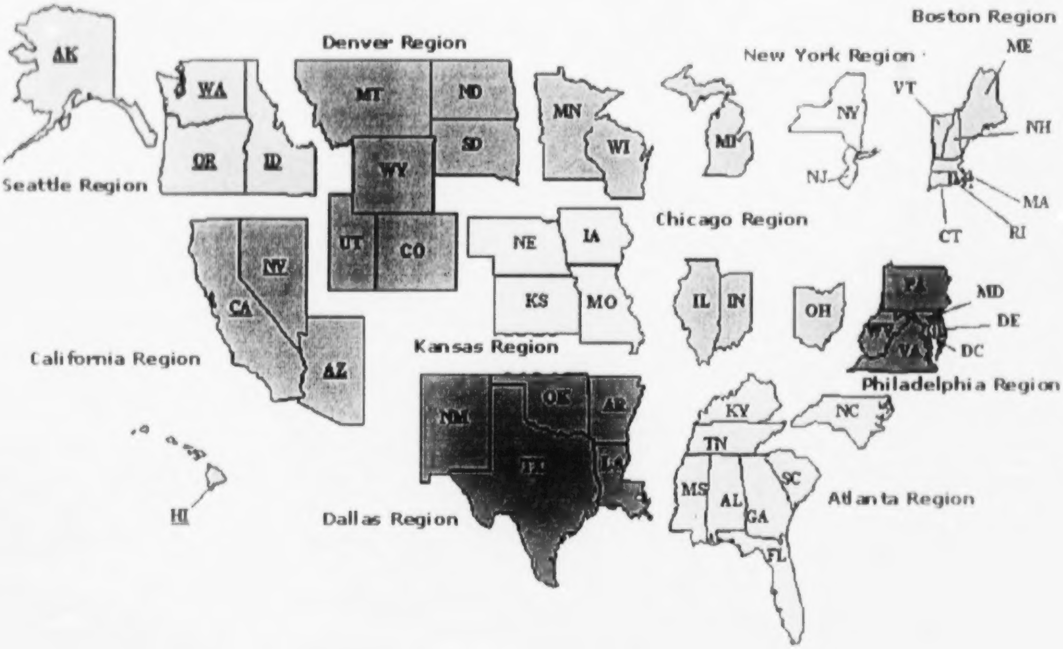
Plan for Achieving Self-Support (PASS) Cadre Map

For general information about PASS, as well as information about Social Security and Supplemental Security Income, call 1-800-772-1213 from anywhere in the U.S. For specific information about PASS, call your area's PASS cadre. Click on the map below to determine the PASS Cadre for your area.


Boston Region
Denver Region
New York Region
AK
WA
OR
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VT
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NH
MA
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CT
Seattle Region
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KS
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IL
IN
OH
PA
MD
DE
DC
WV
VA
California Region
Kansas Region
Philadelphia Region
AZ
NM
OK
AR
TX
LA
KY
TN
NC
SC
MS
AL
GA
FL
HI
Dallas Region
Atlanta Region

Atlanta Region	PASS Cadre	Toll-free Number	Local Number
	Birmingham, AL	800-254-9489	205-801-4444

Map

Boston Region	PASS Cadre	Toll-free Number	Local Number
			617-565-8906,

	Boston, MA	800-297-4291	ext. 3066, 3064 or 3065

Map

California Region	PASS Cadre	Toll-free Number	Local Number
	Anaheim, CA	800-551-1507, ext. 206 or 232	714-502-9233, ext. 206 or 232
	Carmichael, CA	888-383-1862	916-338-3705 ext. 3210 or 3212
	Chico, CA	800-551-1762	530-345-9788
	San Diego, CA	888-674-6250	619-557-6605
	San Francisco, CA	877-612-8474	415-744-5773 ext. 3242

Map

Chicago Region	PASS Cadre	Toll-free Number	Local Number
	Chicago, IL	800-842-0588	312-575-5970 or 5969
	Cincinnati, OH	888-674-6249	513-821-9424 ext. 3008 or 3009
	Lakewood, OH	800-551-2056, ext. 224 or 226	216-228-2926, ext. 224 or 226
	St. Paul, MN	800-551-9796	651-290-0304, ext. 3061,3074 or 3018

Map

Dallas Region	PASS Cadre	Toll-free Number	Local Number
	Ft. Worth, TX	888-287-7845	817-978-1772, ext. 3565, 3642 or 3471

Map

Toll-free

Denver Region	PASS Cadre	Number	Local Number
	Denver, CO	800-551-1034	303-235-0511 or 0637

Map

Kansas Region	PASS Cadre	Toll-free Number	Local Number
	Kansas City, KS	800-551-9289	913-621-3014

Map

New York Region	PASS Cadre	Toll-free Number	Local Number
	Cheektowaga, NY	800-510-5680	716-685-8039
	New York, NY	800-551-9583	212-264-0969, ext. 5 or 6

Map

Philadelphia Region	PASS Cadre	Toll-free Number	Local Number
	Towson, MD	800-551-9305	410-825-4002, ext. 239, 240, or 241

Map

Seattle Region	PASS Cadre	Toll-free Number	Local Number
	Seattle, WA	888-674-6251	206-615-2667 or 2627

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